

THE UNIVERSITY OF OKLAHOMA
STUDENT FINANCIAL CENTER
1000 Asp Avenue, Room 105
Norman, Oklahoma 73019-4078
Phone (405) 325-9000 Fax (405) 325-7608
sfc@ou.edu

DIRECT GRADUATE PLUS REQUEST

Name: _____ Student OU ID: _____
Address: _____ SSN: _____
City, State, Zip: _____ Phone Number: _____

USE THIS FORM TO REQUEST A CHANGE TO YOUR DIRECT GRADUATE PLUS LOAN.

This form must be completed and signed by the student borrower.
You must be enrolled through O.U. in a minimum of 5 credit hours at the time of disbursement.
All Graduate PLUS loans are processed for fall/spring with the exception of December graduates.
If your original credit approval is expired, you must apply for a new Graduate PLUS loan. Do not complete this form.
If your original loan was approved with an endorser, you must apply for a new loan. Do not complete this form.
If you wish to borrow a Graduate PLUS for the summer term, you must apply for a new loan at <https://studentaid.gov/>.
We cannot increase an existing fall/spring Graduate PLUS loan for summer costs.

Indicate the Graduate PLUS Loan change you are requesting below.
Completion of this form is not a guarantee that your request will be approved. Additional steps may be required.
You cannot use this form if your Graduate PLUS loan was approved with an endorser. You and your endorser must apply for a new Graduate PLUS loan at <https://studentaid.gov/> in order to increase your Graduate PLUS loan.

Decrease my Graduate PLUS loan amount to \$ _____
 Cancel my Graduate PLUS loan in full \$ _____
 Cancel my Graduate PLUS loan for fall \$ _____
 Cancel my Graduate PLUS loan for spring \$ _____
 Increase total Graduate PLUS Loan amount to \$ _____ or Maximum amount available

You will need to apply for a new Graduate PLUS loan at <https://studentaid.gov/> if you are requesting an amount higher than your original credit approval or if your original credit approval is expired.

By signing this application, I agree to provide information that will verify the accuracy of the completed form. I certify that I am the person identified by the signature on this form.

Borrower Signature: _____ Date: _____

If persons completing this form purposely give false or misleading information or signatures, those persons may be fined, sent to prison or both.