

___ Please cancel my loan for the Fall/Spring 2016-17 academic year. I understand that unless I have other aid available to cover my tuition, fees and any other charges that I am responsible to Westmoreland for payment.

___ Please reduce the loan to ___ subsidized and ___ unsubsidized for the academic year. I understand that unless I have other aid available to cover my tuition, fees and any other charges that I am responsible to Westmoreland for payment.

___ Please increase my loan to ___ subsidized and ___ unsubsidized for the academic year.

Please understand that any bookstore credit that you have received and used may have been based on the approved loan amounts and may result in a balance due to Westmoreland for which you will be responsible.

Name: _____

ID Number: _____

Signature: _____

Date: _____

If you are requesting any changes to your loan(s), please complete and return this form to:

Mail:
Westmoreland County Community College
Financial Aid Office
145 Pavilion Ln
Youngwood, PA 15697

Email: financialaid@wccc.edu

Fax: 724-925-5802

Phone: 724-925-4063