



2025-2026 Parent Plus Loan Adjustment Form

Please submit the requests to reduce the loan prior to the date of crediting to your account or within 14 days of notification.

A. Parent Information

Last Name First Name M.I.

Parent Email Address Parent Phone Number

B. Student Information

Last Name First Name M.I.

Student Email Address CFK Student ID

C. Requesting a Decrease of Loan

- I want to decrease my Parent Plus Loan by \$_____ for the term:
☐ Fall 2025 ☐ Spring 2026 ☐ Summer 2026

D. Certification and Signature

I certify that all information provided is true and correct to the best of my knowledge.

Parent Signature

Date