

## **Federal Direct Loan Additional Request Form: 2024-2025**

If you need assistance completing this form please contact the Financial Aid Office at (585) 345-6900 or financialaid@genesee.edu

This form can be used to have the Financial Aid Office at Genesee Community College make your requested adjustment. If this form is submitted prior, or up to 14 days after disbursement, your adjustment will be performed and you will receive notice of your new award amount. If you submit this form more than 14 days after disbursement, the Financial Aid Office will evaluate your request and communicate to you if the adjustment can still be made and the impact on your GCC student account.

I am requesting a loan <b>increase</b> in the amount of \$							_
Please	e indicate the semester you would	like th	e adjustment to	occur:			
	Fall 2024		Spring 2025			Summer 2025	
Stude	nt Information:						
Street	Address:						_
City:				State: _		ZIP:	_
Phone	Number:			Cell Pho	one Number:		_
Email	Address:						_
Stude	nt Signature:					Date:	
Is this	s a Parent PLUS Loan? (circle one	e)	NO	YES			
Parent	Signature:					Date:	

Parent signature required for an adjustment to a Parent PLUS Loan only!

**Genesee Community College** One College Road, Batavia, NY 14020 Phone: (585) 345-6900; Fax (585) 343-6726

Email: financialaid@genesee.edu