

Financial Aid and Scholarships
University of California, Davis
One Shields Avenue
Davis, CA 95616-8596

Submit your completed form through [Contact An Expert](#). You will be notified when your request has been processed, or if additional information is required.

2024-25 Parent Direct PLUS Loan Change Form

Student Name: _____ Student ID: _____

Student Date of Birth: _____

Parent Name: _____ Relationship to Student: _____

Parent Email: _____ Last 4 digits of Parent SSN: _____

*Phone: _____ *If this is a new phone number, please update your information on [SISWeb](#).

To request a Federal Parent PLUS loan, the parent borrower must submit an application request and Master Promissory Note (MPN) on [studentloans.gov](#). Complete this form to adjust the current loan amount and indicate if the requested amount is Gross (before fees are deducted) or Net (after fees are deducted).

INCREASE LOANS (Write "MAX" if you want to increase the loan to the maximum eligibility amount)			
<input type="checkbox"/>	Direct Parent PLUS Loan From: \$ _____ to: \$ _____	Net	Gross
<i>(whole dollar amounts only)</i>			

DECREASE LOANS			
<input type="checkbox"/>	Direct Parent PLUS Loan From: \$ _____ to: \$ _____	Net	Gross
<i>(whole dollar amounts only)</i>			
Select One Loan Period:			
<input type="checkbox"/>	Academic Year (Fall/Winter/Spring)	<input type="checkbox"/>	Fall Only
<input type="checkbox"/>	Winter Only	<input type="checkbox"/>	Spring Only
Please note: Payment for any reductions made during the current academic year must be made through UC Davis MyBill , and not through your loan lender.			

ACCEPT PREVIOUSLY OFFERED LOANS (Write "MAX" if you want to increase the loan to the maximum eligibility amount)			
<input type="checkbox"/>	Direct Parent PLUS Loan: \$ _____	Net	Gross
<i>(whole dollar amounts only)</i>			

DECLINE LOANS			
<input type="checkbox"/>	Direct Parent PLUS Loan		

UPDATE REFUND STATUS			
<input type="checkbox"/>	Refund to Student	<input type="checkbox"/>	Refund to Parent

UC Davis will not process a loan request that does not meet federal guidelines.

Please note, your request may create a bill resulting in a registration hold on the student's account. Please visit [MyBill](#) to make payment and/or view detailed balance due. For questions regarding your bill, please contact [Student Accounting](#).

I certify that to the best of my knowledge all information provided on this form is complete and correct.

Parent's Signature: _____ Date: _____