



2017-2018 Student Loan Change Form

1) I wish to have my student loan reduced to \$_____.

OR

2) _____ I wish to cancel my student loan.

Name: _____

Please print

Signature: _____

Student ID: J_____

Date: _____

Adjustments to a student's schedule, including withdrawals, may affect financial aid and/or billing. All unpaid financial obligations may be assigned to an external collection agency. Collection and related legal costs will be added to the amount of indebtedness and will be the responsibility of the student.

**Please return this form to
Jefferson Community College Enrollment Services Center**

1220 Coffeen Street; Watertown, NY 13601

If you have questions, please call 786-2437.