



2018-2019 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 786-2355.**