

Private Loan Processing Form 2026-2027

1. NEW Certification Request

Please certify my gross loan(s) as follows:

Note: Students enrolled in fall/spring may only receive a maximum of 50% of loan funds in the fall. Loans will only be approved up to the approved cost of attendance less all other aid.

Total amount requested and approved by the lender: \$ _____ *Please indicate the amounts per semester you wish to have the loans certified for (do not include cents):*
 Name of Lender: _____

FALL 2026: \$ _____
 SPRING 2027: \$ _____
 SUMMER 2027: \$ _____

or, I prefer my loans be equally distributed across all terms of enrollment (initial): _____

2. DECREASE

Please decrease my gross loan(s) prior to the pending disbursement as follows:

Note: we are unable to decrease loans that have already disbursed to the school. You must return funds to the lender directly.

Total amount I wish to reduce my loans by: \$ _____ *Please indicate the semester of the decrease:*
 Name of Lender: _____

FALL 2026 from: \$ _____ to: \$ _____
 SPRING 2027 from: \$ _____ to: \$ _____
 SUMMER 2027 from: \$ _____ to: \$ _____

3. CANCEL

Please cancel my gross loan(s) prior to the pending disbursement as follows:

Note: we are unable to cancel loans that have already disbursed to the school. You must return funds to the lender directly

Initial all loans that you wish to CANCEL IN FULL:

_____ FALL 2026
 _____ SPRING 2027
 _____ SUMMER 2027

4. LOAN FUNDS I RETURNED TO MY LENDER THAT HAVE ALREADY BEEN DISBURSED

Please update my student aid record to reflect that I have returned the following loans to my lender: *Note: contact your lender to discuss options to return loan funds that have already disbursed to your student account(eBill). You must submit proof of your return for our office to update your debt load. This return will not be reflected in GWeb or your eBill.*

Lender Name: _____ Amount Returned: \$ _____ Semester: _____

My signature is an acknowledgment that the above request(s) may result in a balance due based on adjustments to paid or unpaid loan disbursements. It is my responsibility to review my eBill and resolve my balance in order to prevent a late fee and/or financial hold on my account. An original signature or adobe certified signature is acceptable (digital font signatures are not acceptable).

Student Signature: _____ Date: _____

Please return this form in person or using our secure link: <https://gwu.app.box.com/f/3a87da6d669f4663bc7a5fb35234511f>