



MD Program Office of Financial Aid  
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Washington, DC 20052  
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tel. 202.994.2960

Loan Increase Form 2019-2020

Note: The Financial Aid Office is prohibited, by federal regulation, from funding a student above the cost of attendance.

Name \_\_\_\_\_

GWID \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Please increase my:

- Federal Direct Graduate PLUS loan  
*You must have a valid and approved credit check. If your last credit check was accepted and approved more than 180 days ago you must complete the "PLUS Request" at [studentloans.gov](http://studentloans.gov). Note: this will result in a hard hit to your credit score.*
- Federal Direct Unsubsidized Loan

In the amount of \$ \_\_\_\_\_

I am requesting these funds for this semester:  FALL or  SPRING  BOTH

I have:

- Remaining eligibility **OR**

I need to increase my cost of attendance for the following reason:

- Loan Fees (Grad PLUS 4.248%; Unsubsidized Loan 1.062%) Funds will be disbursed 50% fall and 50% in spring.
- Dependent Care Expenses (include copy of receipts or notarized contract, see policy)
- Computer Purchase (include copy of receipts, see policy)
- Other expense, approved by the Office of Financial Aid/Dean
- Disability Expenses

Signature \_\_\_\_\_ Date \_\_\_\_\_

For Staff Use Only	
__	RBAABUD
__	RLADLOR
__	RPAAWRD
__	RHACOMM
Initials	_____
Proc. Date	_____