

# Loan Adjustment Form 2026-2027

**Student Information (Please Print)**

CTC ID Number \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Please read carefully before making your choices. **An incomplete form will delay processing.**

**Please adjust my loan amounts in the following manner: (Check all that apply)**

**INCREASE my loan**

<b>Check loan type(s):</b> <input type="checkbox"/> Subsidized <input type="checkbox"/> Unsubsidized			
<b>Check the quarter(s) you want increased AND indicate number of credits you plan on taking:</b>			
<input type="checkbox"/> Fall 2026 # of credits: _____	<input type="checkbox"/> Winter 2027 # of credits: _____	<input type="checkbox"/> Spring 2027 # of credits: _____	<input type="checkbox"/> Summer 2027 # of credits: _____
<b>Enter total amount you want increased:</b> \$ _____		<b>OR</b> check box: <input type="checkbox"/> Maximum Allowed	
Adjustment will be divided among all checked quarters			

**DECREASE my loan**

<b>Check loan type(s):</b> <input type="checkbox"/> Subsidized <input type="checkbox"/> Unsubsidized			
<b>Check the quarter(s) you want decreased:</b>			
<input type="checkbox"/> Fall 2026	<input type="checkbox"/> Winter 2027	<input type="checkbox"/> Spring 2027	<input type="checkbox"/> Summer 2027
<b>Enter total amount you want decreased:</b> \$ _____		Adjustment will be divided among all checked quarters	

**CANCEL my loan**

<b>Check loan type(s):</b> <input type="checkbox"/> Subsidized <input type="checkbox"/> Unsubsidized			
<b>Check the quarter(s) you want canceled:</b>			
<input type="checkbox"/> Fall 2026	<input type="checkbox"/> Winter 2027	<input type="checkbox"/> Spring 2027	<input type="checkbox"/> Summer 2027
<b>Check reason for canceling the loan:</b>			
<input type="checkbox"/> will not be attending WVC		<input type="checkbox"/> attending, but do not want loan	

**Additional Information: (Optional)**

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**Signature:** \_\_\_\_\_ **\*\* Date:** \_\_\_\_\_  
 \*\*If electronically signed, I understand that a digital or electronic typed signature has the same legal effect and can be enforced in the Same way as a handwritten signature.

**Office Use Only:**

<input type="checkbox"/> 30 Day	<input type="checkbox"/> Dependent	<input type="checkbox"/> Independent	
<input type="checkbox"/> Sub: \$ _____	Budget# _____	Grade level: _____	Trans. # _____
	<input type="checkbox"/> Unsub: \$ _____		Total: \$ _____

Comments: \_\_\_\_\_

*This page is for information purposes only. It is not required to be submitted with your form.*

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## ***Wenatchee Valley College Non-discrimination Statement***

Wenatchee Valley College is committed to a policy of equal opportunity in employment and student enrollment. All programs are free from discrimination and harassment against any person because of race, creed, color, national or ethnic origin, sex, sexual orientation, gender identity or expression, the presence of any sensory, mental, or physical disability, or the use of a service animal by a person with a disability, age, parental status or families with children, marital status, religion, genetic information, honorably discharged veteran or military status or any other prohibited basis per RCW 49.60.030, 040 and other federal and laws and regulations, or participation in the complaint process.

The following persons have been designated to handle inquiries regarding the non-discrimination policies and Title IX compliance for both the Wenatchee and Omak campuses:

- To report discrimination or harassment: Title IX Coordinator, Wenatchi Hall 2322M, (509) 682-6445, [title9@wvc.edu](mailto:title9@wvc.edu).
- To request disability accommodations: Student Access Coordinator, Wenatchi Hall 2133, (509) 682-6854, TTY/TTD: dial 711, [sas@wvc.edu](mailto:sas@wvc.edu).

## ***Wenatchee Valley College Declaraciones de no discriminación***

Wenatchee Valley College está comprometido a una política de igualdad de oportunidades en el empleo y la matriculación de estudiantes. Todos los programas están libres de discriminación y acoso contra cualquier persona debido a raza, credo, color, origen nacional o étnico, sexo, orientación sexual, identidad o expresión de género, la presencia de cualquier discapacidad sensorial, mental o física, o el uso de un animal de servicio por una persona con discapacidad, edad, estatus o familias con niños, estado civil, religión, información genética, veterano descargado honorablemente o estatus militar o cualquier otra base prohibida por el RCW 49.60.030, 040 y otras leyes y reglamentos federales, o participación en el proceso de queja.

Las siguientes personas han sido designadas para atender consultas sobre las políticas de no discriminación y el cumplimiento del Título IX para los campus de Wenatchee y Omak:

- Para denunciar discriminación o acoso: Coordinador del Título IX, Wenatchi Hall 2322M, (509) 682-6445, [title9@wvc.edu](mailto:title9@wvc.edu).
- Para solicitar adaptaciones para discapacitados: Coordinador de acceso estudiantil, Wenatchi Hall 2133, (509) 682-6854, TTY/TTD: marque 711, [sas@wvc.edu](mailto:sas@wvc.edu)