Request to Increase Parent PLUS Ioan

	Date
I,(Parent Borrower)	, would like to increase the Parent
PLUS loan from \$	to \$ for (Student Borrower's Name)
(Student ID #) are fees that are deducte university by Direct Loan Disclosure Statement. In	In signing this letter, I understand that there ed from the loan prior to the disbursement to the sas outlined in the Notice of Guarantee and signing this letter, I am authorize the Office of Irships to increase my Parent PLUS loan.
	(Signature of Borrower)
	(Borrower's Phone Number)
	(Borrower's email address)

If you agree to the terms and conditions of this letter, please mail letter to:

Hampton University Office of Financial Aid and Scholarships 2nd Floor Whipple Barn Hampton, VA 23668