2020 – 2021
Financial Aid Change Request Form

Date: __________________________ Student ID: __________________________

Last Name: _______________________ First Name: _________________________

Phone Number: ___________________ Email Address: ______________________

FEDERAL STUDENT LOAN CHANGES

_____ Adjust my **SUBSIDIZED** Loan as follows:
  ___ Cancel FULL loan
  ___ Cancel FALL loan
  ___ Cancel SPRING loan

_____ Adjust my **UNSUBSIDIZED** Loan as follows:
  ___ Cancel FULL loan
  ___ Cancel FALL loan
  ___ Cancel SPRING loan

_____ Change amount of **SUBSIDIZED** loan to:
  $___________ for the FULL year
  $___________ for the FALL Semester
  $___________ for the SPRING Semester

_____ Change amount of **UNSUBSIDIZED** loan to:
  $___________ for the FULL year
  $___________ for the FALL Semester
  $___________ for the SPRING Semester

Comments:__________________________________________________________________________________
  ___________________________________________________________________________________________

STUDENT EMPLOYMENT CHANGES

_____ Adjust my **STUDENT EMPLOYMENT** to:
  ___ Cancel FULL award
  ___ Cancel FALL award
  ___ Cancel SPRING award

_____ Change my **STUDENT EMPLOYMENT** award to:
  $___________ for the FULL year
  $___________ for the FALL Semester
  $___________ for the SPRING Semester

CERTIFICATION

By signing this form, I certify all information reported on this form and within the enclosed documentation is complete and correct. I understand that providing false or misleading information may result in a fine, a prison sentence, or both, according to the Higher Education Act of 1965, as amended, Section 490(a). Any false or misleading information is subject to cancellation of all financial assistance.

_____________________________  _______________________
Student Signature  Date