

ENROLLMENT CHANGE FORM
for all Financial Aid Students

Full Name _____

Student ID# _____ - _____

Please adjust my financial aid awards for my updated enrollment level(s). (Student Loan Borrowers: This change *may* cause a delay in funding if an adjustment to a previously awarded loan is necessary - notify us as soon as possible.)

Summer		Fall		Winter		Spring	
1-5 crs	_____	1-5 crs	_____	1-5 crs	_____	1-5 crs	_____
6-8 crs	_____	6-8 crs	_____	6-8 crs	_____	6-8 crs	_____
9-11 crs	_____	9-11 crs	_____	9-11 crs	_____	9-11 crs	_____
12 ⁺ crs	_____	12 ⁺ crs	_____	12 ⁺ crs	_____	12 ⁺ crs	_____

Signature _____

Date ____/____/____

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