



Request to Reprocess Aid

Student Name: _____

SSN: _____ SID: _____

Change in my enrollment level: I am enrolled in _____ credits for _____ quarter/s. Please adjust my award*.

I will not attend in _____ quarter. Please cancel my award for that quarter only; I plan to register for the following quarter.

Please cancel all of my remaining Financial Aid, for the _____ year.

I am requesting to **cancel** my loan for the following quarters:

Fall

Winter

Spring

Summer

I am requesting to **increase** my loan to \$_____

I am requesting to **decrease** my loan to \$_____

Student Signature

Date

*For changes occurring after the fifth day of the quarter, your aid will not be increased.

** Please carefully consider how much you want to borrow, as the Financial Aid Office will only increase your loans once per academic year if there are extenuating circumstances.