

Financial Aid Change Form

Social Security Number - -	ECU ID Number	
Last Name	First Name	Middle Initial

Award Year: _____

Graduation Date: _____

Section 1 Enrollment Adjustment:

Are you requesting adjustments to your enrollment? Yes No (If yes, complete section below)

I will NOT be attending: Fall Spring Summer

I will be attending: Fall Spring Summer

Section 2 Work Study:

Are you requesting adjustments to your Work Study award? Yes No (If yes, complete section below)

ADD Work Study: Fall Spring Summer

CANCEL Work Study: Fall Spring Summer

Section 3 Direct Loans:

Are you requesting adjustments to your loans? Yes No (If yes, complete section below)

CANCEL: Subsidized Unsubsidized

Fall Spring Summer

REDUCE TO: Subsidized \$ _____ Unsubsidized \$ _____

Fall Spring Summer (Total amount will be divided among all terms)

INCREASE TO: Subsidized \$ _____ Unsubsidized \$ _____

Fall Spring Summer (Total amount will be divided among all quarters)

Student's Signature _____ **Date** _____

Loan notes:	For Office Use Only:	
Budget \$ _____	Awarded:	
NSLDS	Semesters: FA SP SU	
Aggregate loan limits: EFC _____	Sub: Intls: _____	
Sub: _____ FA \$ _____	Unsub: Date: _____	
Unsub: _____ Need = \$ _____		<i>Date Received</i>

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