



I have reviewed and understand the changes to my 2024-2025 financial aid offer(s). In accepting this revised offer, I understand that the actual changes to my financial aid and/or disbursement to my account will not occur until I submit this form and all of the documentation requested by the Financial Aid office.

I hereby acknowledge the change in financial aid offered for the:

- checkbox TERM 6
checkbox TERM 1
checkbox TERM 2
checkbox TERM 3
checkbox TERM 4
checkbox TERM 5

Please check one below

- I accept the change in aid
I decline the change in aid
I want to make the following changes to my aid:

By signing this document you authorize the changes to your financial aid package:

Student's Signature Date
Student's Printed Name Student's Date of Birth Student's Cell Phone

Financial Aid Office Use Only:

Changes to the Aid were a result of:
Aid was modified by: \$ (circle one) SUB UNSUB PLUS FWS Other:
Check COA Check NEED Review Sub/Unsub eligibility Leave a Comment!
Email updated aid offer
Aid was modified by: Date: