

I have reviewed and understand the changes to my 2026-2027 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:**

Fall 2026 Semester  Spring 2027 Semester  Summer 2027 Semester

**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: \_\_\_\_\_