STUDENT NAME: ___________________________ SPU ID: _______________________

I REQUEST THE FOLLOWING REVISION TO MY FINANCIAL AID:

☐ Change in Credit Load
Indicate the number of regular on-campus credits you will be taking per quarter. (Do not include
distance learning, media courses, or continuing education/5000 level courses.)

Please note financial aid is not requested from state, federal, or other lending institutions until the
number of credits you are enrolled in matches the number of credits listed on this form.

<table>
<thead>
<tr>
<th>Summer 2015</th>
<th>Fall 2015</th>
<th>Winter 2016</th>
<th>Spring 2016</th>
</tr>
</thead>
</table>

☐ Student Loan Reduction
Please circle loan type:

Unsubsidized Loan Subsidized Loan Graduate PLUS
Perkins Loan Federal Nursing Loan
Institutional Loan Other: __________________________

In 2015-16 reduce the circled loans to $______________ for ______________ quarter(s).

☐ Other Request (example: Work Study, change in program of study)

__________________________________________________________________________

__________________________________________________________________________

Student/Parent Signature ___________________________ Date ___________ Phone ___________ Email ___________

☐ Parent PLUS Loan Revision
The Parent PLUS borrower must request the revision via the email address on their PLUS loan,
submitted to the student’s assigned SFS Counselor, or by completing the following:

In 2015-16 reduce the Parent PLUS Loan to $______________ for ______________
quarter(s).

Parent PLUS Borrower Signature ___________________________ Date ___________ Phone ___________ Email ___________