



Student Financial Services

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2013 - 2014 REVISION OF FINANCIAL AID REQUEST FORM

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.**

Summer 2013	_____	Fall 2013	_____	Winter 2014	_____	Spring 2014	_____
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☐ **Student Loan Reduction**

Please circle loan type:

Unsubsidized Stafford Loan

Subsidized Stafford Loan

Graduate PLUS

Perkins Loan

Federal Nursing Loan

Institutional Loan

Other: _____

In 2013-14 reduce the circled loans to \$_____ for _____ quarter(s).

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

Student 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:

PLUS Revision Requested Amount: \$_____

Parent PLUS Borrower Signature

Date

Phone

Email