

Financial Aid Reevaluation Request

Student Name: Student ID: (Last, First, MI)
<u>Completing this Form:</u> This form is used for requesting a reevaluation of financial aid eligibility based on of the circumstances listed below. Indicate the term for which you are requesting a reevaluation then indicate the specific situation that applies. If your situation is not covered by those listed below consider filing a special circumstance request or a cost of attendance adjustment. If you are confused, please contact our office using the information at the bottom of the page for more information.
Term:
[] Fall [] Spring [] Summer
Indicate Your Request:
[_] Cancel Work Study to request additional Loan Funds
[_] Academic Status Change (indicate below)
[_] Degree Seeking from Non-Degree Seeking
[_] Graduate Accepted (must be fully admitted into a Graduate Program, disbursal of funds is contingent on confirmation of degree conferral)
[_] Pharmacy Program Accepted
[_] Grad PLUS Loan Request
[_] Housing Status Change (Must provide verification such as a lease agreement)
Students must allow 7-10 business days for review. Student will be notified of additional awards through your Patriots email account.
I certify that I have read this form AND I have attached acceptable documentation needed to support my reevaluation request. Electronic Signatures are not accepted.
Signature: Date: