

NMU FINANCIAL AID OFFICE CHANGE FORM

Name _____ NMU IN# _____

Request is for:

E-mail _____ Local Phone _____

Fall & Winter

Local Address _____

Fall Winter

City/State/ZIP _____

Summer

AID ADJUSTMENTS	<input type="checkbox"/> I wish to APPLY for/ REINSTATE \$ _____ in a/an:	<input type="checkbox"/> CANCEL my	<input type="checkbox"/> Subsidized Loan
	<input type="checkbox"/> Subsidized Loan	<input type="checkbox"/> Unsubsidized Loan	<input type="checkbox"/> Additional Unsubsidized Loan
	<input type="checkbox"/> Unsubsidized Loan	<input type="checkbox"/> Perkins Loan	<input type="checkbox"/> Work Study
	<input type="checkbox"/> Additional Unsubsidized Loan		
	<input type="checkbox"/> REDUCE my	<input type="checkbox"/> Subsidized Loan	Current Loan \$ _____
	<input type="checkbox"/> Unsubsidized Loan	<input type="checkbox"/> Additional Unsubsidized Loan	- Requested Decrease \$ _____
	<input type="checkbox"/> Perkins Loan		= New Loan Amount \$ _____
	<input type="checkbox"/> INCREASE my	<input type="checkbox"/> Subsidized Loan	Current Loan \$ _____
	<input type="checkbox"/> Unsubsidized Loan	<input type="checkbox"/> Additional Unsubsidized Loan	+ Requested Increase \$ _____
			= New Loan Amount \$ _____

My **GRADE LEVEL HAS CHANGED** to: Sophomore Junior/Senior Graduate Student
Please consider me for \$ _____ in a/an Subsidized Loan Unsubsidized Loan

CONSIDER me for Work Study

REDUCE my Work Study award from \$ _____ to \$ _____

ADDITIONAL AID	If you will be receiving aid other than what you have already been awarded (outside scholarships, etc.) please indicate the type of award and academic year amounts below. It is a federal requirement that you notify our office of any additional aid you will be receiving, and may result in adjustments to your current awards. List additional awards in "Other" section below.			
	<u>Award Name</u>	<u>Amount for Year</u>	<u>Award Name</u>	<u>Amount for Year</u>
	_____	\$ _____	_____	\$ _____
	_____	\$ _____	_____	\$ _____

OTHER	<u>Other</u>

	<u>Housing</u>
	If your housing plans have changed, please indicate your new housing plans:
	<input type="checkbox"/> On Campus <input type="checkbox"/> Off Campus <input type="checkbox"/> With Parents/Relatives

NOTE: Receipt of monies indicated is based on minimum enrollment requirements.

Upon approval by the Financial Aid Office, I accept the awards, as adjusted. I will use all financial assistance, including Federal Title IV funds, for educational expenses only. I understand that all of the funds, other than employment, may be applied directly to my University charges. I will also abide by the University regulations governing refunds of scholarships, grants and loans not used for educational expenses. I understand that adjustments may be made based upon any supplementary aid I receive from other sources, changes in housing arrangements or changes in State and/or Federal funding. I also understand the University's satisfactory academic progress requirements.

Signature _____ Date _____ Expected NMU Graduation Date _____