## East Central University

# Financial Aid Change Form

	ECU ID Number	
Last	First	Middle
Name	Name	Initial

Award Year:		Graduation Date:					
Section 1 Enrollment Adjustment:							
Are you requesting adj	ustments to your enrollme	nt? 🗆 Yes	□No	(If yes, complete section below)			
I will NOT be attending:	□Fall □Spring						
I will be attending:	□Fall □Spring	Summer					
Section 2 Work Study:							
Are you requesting adjustments to your Work Study award?  Yes No (If yes, complete section below)							
ADD Work Study:	🗆 Fall 🛛 🖸 S	Spring 🗌	Summer				
CANCEL Work Study:		Spring 🗌	Summer				
Section 3 Direct Loans:							
Are you requesting adjustments to your loans?  Yes No (If yes, complete section below)							
CANCEL:	□ Subsidized		🗆 Unsut	osidized			
□Fall	🗌 Spring 🗌 Summer	· 🗌					
REDUCE TO:	Subsidized \$		Unsut	osidized \$			
<i>Fall</i>	Spring Summer		(Total amount	will be divided among all terms)			
INCREASE TO:	Subsidized \$		Unsut	osidized \$			
Fall	Spring Summer		(Total amount	will be divided among all quarters)			

### Student's Signature

#### \_Date \_\_

Loan notes:	Budget	For Office Use O			
<u>NSLDS</u> Aggregate loan limits:	EFC		Semesters: FA	SP SU	
Sub:	FA	<u>\$</u>	Sub:	Intls:	
Unsub:	Need =	<u>\$</u>	Unsub:	Date:	Date Received

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## **Financial Aid Office**