

Financial Aid Services 6000 16th Ave SW, Seattle, WA 98106 FinancialSouth@SeattleColleges.edu (f): (206) 934-7947

Request to Revise Financial Aid 2020-2021

First Na	ame			Last Name	
		(Please Print)			
SSN	/SID	Stud	lent ID	Birthdate	
	Change of enrollm	nent level: I am only e	enrolled for	credits for the following quarter	(s):
	() Fall Quarter	() Winter Quarter	() Spring Quarto	er () Summer Quarter	
	Warning: if your a	id is reduced as a resi	ult of your enrollme	ent level, and you later increase your enro	ollment level,
	your aid will only b	e adjusted upward if	the increase in you	r enrollment level occurs by the 5 th day o	f the quarter,
	and if funding is a	vailable.			
	I will not attend for	or the following quart	er(s):		
	() Fall Quarter	() Winter Quarter	() Spring Quarto	er () Summer Quarter	
	Please cancel my a	nid for the above qua	rter(s) <u>only</u> because	e I plan to return/enroll the following qua	arter. (<i>Please</i>
	remember that withdrawing from classes must be done at the Registration Office or online by the student)				
	□Please cancel <u>all</u> o	f my remaining 2020-	2021 financial aid.		
	□Please cancel <u>all</u> o	f my loan funds for 20	020-2021.		
	Please reduce my	subsidized loan by \$_	and	or unsubsidized by	
\$	□	Please cancel my Wo	rk Study and replac	ce it with:	
	Subs	sidized loans	Unsubsidize	d loans	
	I would like to can	cel my Work Study av	ward for the 2020-2	2021 academic year.	
	☐Please reissue my	financial aid award fo	or the following qua	rter(s)	
	() Fall Quarter	() Winter Quarter	() Spring Quarto	er () Summer Quarter	
	Please Note: Reiss	uance of Financial Aid	d is contingent on fo	unds available.	
	Other (Please be s	pecific):			
	·	,			
Signatu				Date:	
	Ple	ase print , then sign and	i date above.		

I understand that if I have a student loan and take <u>less than 6 credits</u> in any quarter or take a quarter off, my loan will be cancelled for that quarter and beyond.