

## Please complete in blue or black ink if possible. Typed signatures will not be accepted.

## **Student Financial Services**

P 206-281-2061 or 800-737-8826 (toll free)

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3307 Third Avenue West, Suite 114, Seattle, Washington 98119

SPU.EDU/SFS

## 2025 - 2026 FINANCIAL AID REVISION REQUEST FORM

STUD	STUDENT NAME:			SPU ID:					
I REQ	UEST THE F	OLLOWIN	G REVISIO	ON(S) TO M	Y FINANCIA	AL AID:			
	Change in Credit Load Indicate the number of regular on-campus credits you will be taking per quarter. ( <b>Do not</b> 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.								
	SU 2025		FA 2025		WI 2026		SP 2026		
	STUDENT	LOAN RE	EINSTATE	EMENT					
Stu	dent Loan(s)		E	Enter the net	ʻamount you einstate:	u Ente	r which quart like the loan	er(s) you would	Ħ
	leral Direct Unsubsidized Loan leral Direct Subsidized Loan								
Fed	Federal Direct Grad PLUS Loan								_
Fed	deral Nursing Loan								_
Inst	itutional Loa	n							
	u'd like to reduce	e, cancel, or in u <b>est</b> (examp	acrease a Pare	ent PLUS loan, <sub>l</sub>	olease complet	e the Parent	t PLUS Loan Rev	e has been appli vision Request form the in program of	