



: `cf]XU5 hUb]Wl b]j Yfg]miCZ]W`cZGh XYbh:]bUbW]U`5]X`
 FYei YghZ`f`7 UbW`U]cb#F Y]bg]U]Ya Ybh#F Yj]g]cb`cZ5]X`
 DUW_U] Y`&\$% !&\$% `5 k UFX`MYUf

Mci `a Umgi Va]h]h]g]Z`fa `tc`h Y`bYUfYgh: 5I `CZ]W`cZGh XYbh:]bUbW]U`5]X`cWU]cb"
 CZ]W`UXXfYggYg`UbX`d\ cbY`bi a VYfg`WUb`VY`Z:i bX`Uh
[\ ftd.#k k k 'Z\]i 'YXi #\]bU\]X#W`cb\]UW\]d\ d](#)

_____ Z _____
 Student Name Student Z Number FAU Email Address

BCH9.H<=G: CFA`G<CI @`BCH`69`I G98 : CF`8`F97H`@C5B`F9J`G`CBG

Requests for Direct Loan increases/decreases should be made through the
[`8 \]fYWiGi Vg\]X\]nYX# bgi Vg\]X\]nYX`@Ub`FYj \]g\]cb`FYei Ygh: cfa`.](#)

Please indicate below the purpose of your request and the semesters the request applies to

Cancel ALL my financial aid for the semesters indicated Fall 2018 Spring 2019 Summer 2019

Reinstate ALL my financial aid for the semesters indicated (note: request will be processed for the maximum for which you are eligible – please check the status of your financial aid awards on MyFAU periodically as you may need to accept reinstated awards). Fall 2018 Spring 2019 Summer 2019

I am requesting approval for a supplemental Short Term Advance for amount and semesters indicated (note: must provide explanation of extenuating circumstances below for consideration) Fall 2018 Spring 2019 Summer 2019
 Amount of funding requested \$ _____

OTHER – Please use area below to detail request and explanation/justification

9I d`UbU]cb`#>i qh]Z]WU]cb`Ug`tc`k\ miUX]HcbU`Z bXg`UfY`bYYXYX.`fk f]h`cb`VUW`]ZbY]W]ggU]fnt.

- Denial or request for additional information for this revision will be communicated via FAU Email.
- Requests for funding will be subject to fund availability and may not be approved if funds are not available.

 Student Signature Date

FINANCIAL AID USE ONLY
 Approved Denied
 Comment: _____

 Counselor Date