

2017-2018 General Action Request



Student Name _____ Student ID# N _____

Section I: Action Requested

- Decline Award(s):** Please change the award(s) marked below from Accept status to Decline status.
- Federal Work Study: decline my total work study amount for the _____ (circle all that apply) **Fall / Spring / Summer** semester(s)
- Federal Grant(s): decline the grant(s) listed for the _____ (circle all that apply) **Fall / Spring / Summer** semester(s)
- _____
- Institutional Grant(s): decline the grant(s) listed for the _____ (circle all that apply) **Fall / Spring / Summer** semester(s)
- _____
- Institutional Scholarship(s): decline the scholarship(s) listed for the _____ (circle all that apply) **Fall / Spring / Summer** semester(s)
- _____
- Decline All Awards:** Please cancel all financial aid for the _____ (circle all that apply) **Fall / Spring / Summer** semester(s) of the aid year listed above.
- Are you transferring schools? NO YES If so, where?: _____

- Unreported Resources:** The following resource has not been previously reported to UNF.
(Such as Private Scholarship, Employer Reimbursement, Grad Assistantship or Department Waiver/Grant)
- Resource type _____ Amount \$ _____ for **Fall / Spring / Summer** semester(s)
- Resource type _____ Amount \$ _____ for **Fall / Spring / Summer** semester(s)

- Complete the attached form for:** Fall _____ year Spring _____ year Summer _____ year
- I will pick up my completed form Please mail my form to me Please mail my form to my servicer
- _____
- _____
- _____

- Grade Level Change:**
- I have or will graduate in (circle one) **fall /spring** _____ year please change my (circle one) **spring/summer** _____ year award to:
- Degree-Seeking Graduate Student Degree-Seeking Post Baccalaureate or second Bachelor Seeker
- *Note: UNF will update your FAFSA to reflect your grade level change as a result of this request.*

- Graduation Date:** Please change my graduation date to: _____ term _____ year

- GRE Fee Reduction:** General Test Subject Test Writing Assessment

Section II: Required Signature

Student Signature

Date signed

Received by: _____

Processed by: _____

Date: _____

Revised 10/28/16

Date: _____