

Please complete this form using blue or black ink

Student Name: _____
Last Name
First Name/MI
Student ID#

Address: _____ Phone _____
Street Address
Apt #

City
State
Zip

Change in Enrollment Status

Changes are subject to availability of funds and eligibility requirements. Adjustments will not be made after the end of the first week of the term unless circumstances were beyond your control. An explanation and documentation are required after the first week of the term. Please mark the appropriate selection(s) and return this form to TBCC's Financial Aid Office.

	Not Enrolled	¼ time (1-5 credits)	½ time (6-8 credits)	¾ time (9-11 credits)	Full time (12+ credits)
Summer 2016	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fall 2016	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Winter 2017	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spring 2017	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Changes:

By signing below, I (the student) understand that any term which I have selected Not Enrolled, my existing financial aid award for that term will be cancelled.

Student Signature _____

Date _____

Student - Do Not Write Below

Change in aid request is: _____ Approved _____ Denied _____ Pending _____ No Action _____ Revised Award

Comments _____

FA Advisor Signature _____ Date _____

