

P.O. Box 41206 • Lafayette, LA 70504-1206 Phone: (337) 482-6506 • Fax: 337-482-6502

2023-2024 Award Revision Request Form

ULink allows students to m decision on your awards in			2 1	this form after you h	nave made a
Last Name, First Name M.I. Phone Num		ber	ULID Number		
STEP 1					
Indicate which semester	(s) you want adjus	sted:	Fall \square	Spring	Summer
☐ Returning for Gra ☐ Not attending	ntion date. Anticipaduate School		date:		
STEP 2					
Please choose only one d	lecision per award				
Award type	Accept maximum award	Decline entire award	Accept part	ial award as indicated:	:
Subsidized Loan			Fall \$ Spring	\$ Summer	\$
Unsubsidized Loan			Fall \$ Spring	\$ Summer	\$
Grants (Pell, SEOG, GO)			N/A		
Federal Work Study	N/A*		*Requests must be made in the	Student Employment Office	(Foster, Rm 221)
Certification and Signatu	ıres				
By signing below, I author that the Financial Aid Offi and eligible amounts may An original signature is re	rize UL Lafayette to ce will determine t differ.	the actual amo	unt for which I am eligibl		
Student Signature			-	Date	
					RVLOAN

[▶] Securely submit your documents via the *Financial Aid Secure Document Upload* link at https://financialaid.louisiana.edu/fileupload ◀