*Pecos Campus*
*Financial Aid Office*
*Division of Student Affairs*
*2626 East Pecos Road*
*Chandler, AZ 85225*
*(480) 732-7311*
*Fax: (480) 857-5205*

# Chandler-Gilbert Community College
# REVISION FORM

*Williams Campus*
*Financial Aid Office*
*Division of Student Affairs*
*7360 E. Tahoe Ave*
*Mesa, AZ 85212*
*(480) 988-8135*
*Fax (480) 988-8130*

**Student's Name:** _____ **Student ID #:** _____

It is necessary to revise my financial aid award for the following reason(s):

**Change in Enrollment Status:**

☐ I have changed my enrollment status. I am now enrolled in: (Indicate # of credit hours or check withdrawn statement)

_____ credits for the **Fall** semester _____ credits for the **Summer I** semester
_____ credits for the **Spring** semester _____ credits for the **Summer II** semester

☐ I have withdrawn from all classes. I understand I may be required to repay all or part of my financial aid award. Notice will be sent to me concerning any balance due.

☐ My award needs to be cancelled or revised as I will not be attending CGCC during the _____ semester(s).

☐ My award needs to be reinstated for _____ semester(s). I am now enrolled for _____ credits.

**Request to be awarded a Student Loan:**

I would like to request a student loan for the (please circle) **Fall** **Spring** **Summer** semester(s).

I am requesting this loan in order to (check one): ☐ receive it for the first time this year
☐ receive **additional** loan funds this year

☐ Subsidized Direct Stafford Loan
☐ Unsubsidized Direct Stafford Loan
☐ Direct PLUS Loan (additional forms required)

I would like (check one): ☐ the maximum
☐ $ _____

☐ After I'm done attending CGCC, I plan to transfer to a university.

**Other requests or changes:**

_____

_____

_____

_____ _____
Student's Signature Date

**FAO Action:** ☐ **Completed requested changes** ☐ **Unable to accommodate request**
**Comments:** _____

_____

**Financial Aid Officer's Signature:** _____ **Date:** _____

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