

Student Financial Aid Revision Form

REVISE	
Term:	
Aid Year	

Name			Student ID# (CWID)		
Last	First	MI			
If graduating this yea	r, indicate your fin	al term			
If you are not attending t available for the trimeste	he full academic year, rs you need. I will be a	please indicate w ttending the sele	which trimesters you will attend. Ected semesters:	This will help us make your aid	
☐ Fall 20 ☐ Spring 20 ☐ Summer 20					
or more than one semes	ter must have equal d	sbursements for		change below. Please note that loan	
Please consider me for th	e following award cha	nge:			
	Fall		Spring	Summer	
Subsidized Stafford Loan	\$		\$	\$	
Unsubsidized Stafford Loa	an \$		\$	\$	
*Parent PLUS	\$		\$	\$	
offer an addit ☐ I will not be a may result in	ional unsubsidized ttending three terr a one-term loan th	loan. ns and reques		n endorser or override. Please r only the terms indicated. Thi ed loan amount.	
Uther reason	or explanation:				
*Parent Signature		Date	Student Signature	Date	

Please return form to:

OSUIT Financial Aid & Scholarships

1801 E. 4th St., Okmulgee, OK 74447 918.293.4684 (Phone) | 918.293.4650 (fax)

osuitfinancialaid@okstate.edu