

# University of Idaho

Student Financial Aid Services  
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**OFFICE USE ONLY**  
Doc: CHSIT/ENRL – G2

## CHANGE OF SITUATION FORM (Change of Awards or Enrollment)

Student: \_\_\_\_\_ Student V#: \_\_\_\_\_  
Please Print

Today's Date: \_\_\_\_\_ Student Phone #: \_\_\_\_\_ Aid Year: 20\_\_\_\_/20\_\_\_\_

➤ **REQUESTED CHANGE IN AWARD (CHSIT)** (Please contact our office if you are unsure how to complete this area)

<input type="checkbox"/> Accept my (type of award):	_____	for \$
<input type="checkbox"/> Accept Parent PLUS bypass:	<b>UNSUBSIDIZED</b>	for \$
<input type="checkbox"/> Increase my (type of award):	_____	by \$
<input type="checkbox"/> Decrease my (type of award):	_____	by \$
If decreasing Parent PLUS loan, please provide contact phone number for parent borrower –		
<input type="checkbox"/> Decline the full amount of my award (type of award):		
<input type="checkbox"/> My grade level will soon change from _____ to _____ Please review my loan eligibility after my grades have posted.		

➤ **CHANGE IN ENROLLMENT STATUS (ENRL)**

<input type="checkbox"/> I will <b>NOT ENROLL</b> at UI for the semester: _ FALL _____ SPRING _____ SUMMER
<input type="checkbox"/> I expect to graduate in December and will not attend during the spring semester.
<input type="checkbox"/> My enrollment plans for the 20__-20__ academic year at UI are: . Credits FALL and _____ Credits SPRING (Please note the number of credits you plan to take)

**OTHER CHANGES OR EXPLANATION FOR ABOVE CHANGES** (If you require more space, please attach a separate piece of paper or use the back of this form).

**CERTIFICATION:** By signing this worksheet, we certify that all the information above is complete and correct. The student (and a parent whose information was reported on the FAFSA) must sign and date. If you purposely give false or misleading information, you may be fined, sent to prison, or both.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

<b>FOR OFFICE USE ONLY</b>	
RECEIVED: PER PHONE	PER EMAIL
IN PERSON	BY _____
DATE _____	
PROCESSING:	1. Enter on RRAAREQ as code CHSIT or ENRL w/ status at N; if a doc is already present, change status to N
	2. On RHACOMM. enter CHSIT# __ (1,2, etc.) and briefly describe the situation;
	3. Route the document to the Financial Aid Counselor's file