

Revision Request Form

2025-2026

1. All requests will be reviewed for eligibility and may be limited or denied.
2. Loan adjustments are made on an individual basis depending on your loan status and for what you are eligible.
3. Previously cancelled loan funds will first be reviewed for eligibility before being reinstated.
4. Adjustments may not exceed your loan limits or cost of attendance budget for both the term AND the year.
5. Revisions should be requested for the full year, or for your enrollment period if less than a full year.
6. The total loan amount will be disbursed in equal payments over your enrollment period.
7. **Undergraduate Students and Post-Bacc Students:** 6-8 credits half-time, 9-11 credits $\frac{3}{4}$ -time, 12 or more full-time.
8. **Graduate Students:** 4.5-6 credit hours half-time, 7-8 credits $\frac{3}{4}$ -time, 9 or more full-time.

Student's Name: _____ Student SSN/ID Number: _____

Enrollment Level Change Please select grade level: ☐ Undergraduate/Post-Bacc ☐ Graduate

Fall Term ☐ Not Enrolled ☐ Less Than $\frac{1}{2}$ time ☐ 1/2-time ☐ 3/4-time ☐ Full-time ☐ Graduating
Winter Term ☐ Not Enrolled ☐ Less Than $\frac{1}{2}$ time ☐ 1/2-time ☐ 3/4-time ☐ Full-time ☐ Graduating
Spring Term ☐ Not Enrolled ☐ Less Than $\frac{1}{2}$ time ☐ 1/2-time ☐ 3/4-time ☐ Full-time ☐ Graduating

Grade Level Change – Requesting maximum award eligible to receive.

☐ I am **NOW** a SOPHOMORE (45-89 credits) ☐ I am **NOW** a JUNIOR (90 or more credits)

Parent PLUS Loan Denied

☐ I am requesting the maximum subsidized/unsubsidized loans based on my grade level (Fresh=\$9500, Soph=\$10,500, Jr/Sr=\$12,500)

Cancel My Loan for the Entire Year ☐ Subsidized ☐ Unsubsidized ☐ Graduate PLUS ☐ Parent PLUS

Subsidized Stafford Loan

☐ Reinstatement my student loan eligibility to the maximum amount.

☐ Decrease my loan by \$_____ for what term(s) _____ for a total of \$_____ for the year

☐ Increase my loan by \$_____ for what term(s) _____ for a total of \$_____ for the year

☐ Revise my loan **FROM** [what term(s)]: ☐ Summer ☐ Fall ☐ Winter ☐ Spring **TO** ☐ Summer ☐ Fall ☐ Winter ☐ Spring
(Your current loan disbursement schedule) (Your requested loan disbursement schedule)

Unsubsidized Stafford Loan

☐ Reinstatement my student loan eligibility to the maximum amount.

☐ Decrease my loan by \$_____ for what term(s) _____ for a total of \$_____ for the year

☐ Increase my loan by \$_____ for what term(s) _____ for a total of \$_____ for the year

☐ Revise my loan **FROM** [what term(s)]: ☐ Summer ☐ Fall ☐ Winter ☐ Spring **TO** ☐ Summer ☐ Fall ☐ Winter ☐ Spring
(Your current loan disbursement schedule) (Your requested loan disbursement schedule)

Notes:

Student Signature: _____ Date: _____

Financial Aid Office

One University Blvd., La Grande, OR 97850
Phone: (541) 962-3550 • Fax: (541) 962-3661
Email: loanprocessing@eou.edu
Web: www.eou.edu/fao

OFFICE USE ONLY