



Office of Financial Aid & Scholarships

2601 Gentilly Boulevard ~ Rosenwald Hall, Room 126
New Orleans, Louisiana 70122 - (504) 816-4677 or FAX (504) 816-5456

REVISION REQUEST FORM

STUDENT: Print legibly and clearly in ink

Form with fields for LAST NAME, FIRST NAME, M.I., SCHOOL ID#, PHONE #, Legal STATE of Residence, Zip Code, GPA, Name State, Zip of Legal Residency, List your overall GPA, MAJOR, CLASSIFICATION, Dillard's E-MAIL address

ACTION REQUEST & APPLICABLE SEMESTER: Mark the applicable box(es)

Action Request:

- Request Additional Aid, Reduce Aid, Reinstate Aid, Cancel Aid

Applicable Semester(s):

- Fall Semester, Spring, Summer

TYPE OF AID: Check applicable box(es)

- Scholarship Funds, SEOG, LA GO, Direct Sub, Direct Unsub

OTHER (Name)

NOTE: Completion of this form does not guarantee that you will be awarded additional financial aid. If you are awarded additional aid, then you will receive an electronic notification (via e-mail) notifying you to review your revised award online. If you are applying for summer aid or Federal Work-Study, then a separate application is required.

STUDENT'S SIGNATURE DATE

SCHOOL USE ONLY section with fields for Cum GPA, Hours Enrolled, Grad Date, Student type (New/Cont.), Criteria Assessment, Counselor, Date