

2017-18 REQUEST FOR FINANCIAL AID RE-EVALUATION

This form is to be used to report changes in credit hours, program, residency and other items that may affect your financial aid. Please see the Special Condition Form if you have suffered a loss of income or have special needs for a disability, dependent care, etc.

Change in Credit Hours

Aid is awarded for the enrollment level you listed on your Free Application for Federal Student Aid (FAFSA), as appropriate for your program. The enrollment level for which you were awarded is shown on TitanConnect. If you will enroll for a different level than you originally reported, indicate the correct information below.

- Please change credit hours for Fall to _____
- Please change credit hours for Winter to _____
- Please change credit hours for Summer to _____

Change in Program (must be approved by Dean/Registrar)

- I will be a full time day JD/MBA JD/JD student effective Term _____, 2017-18
- I will be a part-time day student effective Fall Winter Summer, 2017-18
- I will be an extended day student effective Fall Winter Summer, 2017-18
- I will be a regular evening student effective Fall Winter Summer, 2017-18
- I will be an extended evening student effective Fall Winter Summer, 2017-18

Change in Campus

- I will NOT be attending the dual JD program (term) _____, 2017-18, but had applied to attend.
- I will be taking courses at another law school (term) _____, 2017-18 (requires approval of Dean).
Name of School _____ Number of Credits _____ Term _____

Change in Residency Status

- I will live with parents or relatives (other than a spouse) beginning (date) _____.
- I will live in the dorms at the McNichols Campus beginning (date) _____.
- I will live in my own home/apartment beginning (date) _____. (List new address below)
- I have moved effective (date) _____. (Please update address on TitanConnect)

New Address/dorm room _____

City, State, Zip Code _____

Area Code and Phone Number _____

Other Changes

- Request Work Study Change Work Study to Loan (list reason on back)
- Change loan amount (details on back) Other (specify on back)

Signature _____ Student ID _____ Date _____

Return this form to the UDM School of Law Financial Aid Office, 651 E. Jefferson, Detroit, MI 48226/fax: 313-596-9837