
Student's Name

N_____
NSCC ID number

Previously, I informed the Financial Aid Office of the semester(s) for which I planned to enroll during the 2025-2026 academic year. However, I am now requesting that the Financial Aid Office adjust my financial aid based on the semester(s) listed below.

Check all semesters in which you plan on attending

☐ Summer 2025

☐ Fall 2025

☐ Spring 2026

Please read through and initial each of the following statements:

_____ I understand my financial aid awards will be based on an ESTIMATE enrollment of full-time (12 + credit hours) but will be adjusted automatically if I am enrolled in less than full-time.

_____ I understand that this change could decrease the amount of financial aid for which I am eligible.

_____ I understand my financial aid awards will be divided equally based on the semester(s) selected above.

_____ I understand I must be enrolled in at least six (6) credit hours per semester to be eligible for student loans.

_____ I understand that my financial aid will pay to my account based on the credit hours that I am enrolled and attending. If you have a class that starts later, your financial aid refund may be delayed.

By my signature below, I certify that I understand my financial aid will be based on my enrollment status on the financial aid freeze date each term and that the Financial Aid Office will make any adjustments necessary based on enrollment status

Student's Signature

Date

Northwest State Community College does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion or age in its programs or activities.