

## **2024-2025 PETITION FOR RE-EVALUATION**

Name: Last

First

UID#

• Please use this form to make or report any necessary changes to your financial aid awards. A new electronic Financial Aid Notification (FAN) statement will be posted on MyUCLA\ when your awards are revised. \*

Requests must be submitted at least two (2) weeks prior to end of your enrollment term.

LOAN ADJUSTMENTS						
	<ul> <li>Cancel my loan for the following terms : □Fall □Winter □ Spring</li> <li>□ University Loan □ Subsidized □ Unsubsidized □ PLUS □ Grad PLUS □ Private</li> <li>□ CA Dream</li> <li>*We can only cancel Direct Loans disbursed within 120 days from disbursement date. A bill will appear on your BruinBill 2-3 days after the loan cancellation is processed.</li> </ul>					
	I would like to convert my Federal Work–Study award into a loan.					
	I would like to reduce my loan <i>(you will be billed for funds already disbursed)</i> : University Loan Subsidized Unsubsidized PLUS Grad PLUS Private CA Dream					
	Please select the term(s) you would like to reduce loan for : $\Box$ Fall $\Box$ Winter $\Box$ Spring Please specify the total amount of loan you would like to receive for the terms indicated					
	Reinstate a previously canceled or rejected loan: University Loan Subsidized Unsubsidized PLUS Grad PLUS Private CA Dream					
	My parent applied and was denied for the Parent PLUS Loan. Please award me an additional Unsub- sidized loan up to my maximum eligibility. <i>You can receive an additional unsubsidized loan of:</i> <i>Freshman \$4000, Sophomore \$4000, Junior, Senior</i> + <i>\$5000 based on eligibility/cost of attendance</i>					
	<b>My parent is unable to apply for Parent PLUS Loan</b> . My parent is not a U.S. citizen, permanent resident and unable to provide evidence from the U.S. Citizenship and Immigration Service that they are in the United States for other than a temporary purpose with the intention of becoming a citizen or permanent resident, or my parent has unusual circumstances such as, bankruptcy, incarceration, limited income due to disability or public assistance. Please send me a Special Circumstance Appeal Form via Message Center. I understand I must provide the necessary documentation listed on the appeal to receive additional unsubsidized loans.					

## (CONTINUED)

** Y for fi	ANGES TO ENROLLMENT S ou must be enrolled at least half-time nancial aid. Please be advised that ch ellation of financial aid.*	(6 units for under			
	I have changed my enrollment state # of enrolled units for:	us as shown belov Fall	v ( <u>do not lea</u> Winter	ve blanks): Spring	
	□ I will be in the <b>Reduced Fee Program (8-11 Units)</b> for the following terms:				
Please indicate the number of enrolled units for:					
	Fall 2024	Winter 2025_		Spring 2025	
	If enrollment is different than units	s indicated above	on our censu	s date, you may be billed.	
Please	I will be receiving the following: Name of Award	may result in a re	eduction or o	cancellation of financial aid. Total Amount	
				\$	
				\$	
				\$	
OTHER					

CERTIFICATION STATEMENT: I certify that all information reported on this form is true and accurate to the best of my knowledge. I have also attached all required documentation if necessary. I understand that purposely falsifying information may lead to a cancellation of my aid and prevent me from receiving financial aid in future academic years.

Student Signature	Date			
HOW TO SUBMIT				
<u>Online</u> Log on to MyUCLA> click Finances and Jobs tab> under Financial Aid and Scholarships click> View All Documents. Attach form as necessary.	Mail/In-Person: Murphy Hall A-129J P.O Box 951435 Los Angeles, CA 90095			