



## AWARD CHANGE REQUEST FORM

**Academic Year 2022-2023**

**DIRECTIONS** — If you would like to increase, reduce, or cancel any of your financial aid awards, complete and return this form to the Student Financial Services Office.

**Return this form**

**By mail to:**  
Student Financial Services  
Saint Martin's University  
5000 Abbey Way SE  
Lacey, WA 98503

Phone: (360) 438-4397  
Fax: (360) 412-6190

PART A - Student information						
Name (last, first, middle initial)	Student ID#	Phone (include area code)				
Current mailing address (street, apartment or PO Box number, city, state, ZIP code, country)						
PART B – AWARD REVISION REQUEST						
I am requesting the following revision to my award letter:						
		Requested Award Amount Per / Semester				
Change	Name of Award	FALL	SPRING	SUMMER	Total Requested	
<input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> Decline <input type="checkbox"/> Revise						
<input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> Decline <input type="checkbox"/> Revise						
<input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> Decline <input type="checkbox"/> Revise						
Notes:						
Student Signature					Date	