

# Revision Request Form

2025-2026

1. All requests will be reviewed for eligibility and may be limited or denied.
2. Loan adjustments are made on an individual basis depending on your loan status and for what you are eligible.
3. Previously cancelled loan funds will first be reviewed for eligibility before being reinstated.
4. Adjustments may not exceed your loan limits or cost of attendance budget for both the term AND the year.
5. Revisions should be requested for the full year, or for your enrollment period if less than a full year.
6. The total loan amount will be disbursed in equal payments over your enrollment period.
7. **Undergraduate Students and Post-Bacc Students:** 6-8 credits half-time, 9-11 credits ¾-time, 12 or more full-time.
8. **Graduate Students:** 4.5-6 credit hours half-time, 7-8 credits ¾-time, 9 or more full-time.

Student's Name: \_\_\_\_\_ Student SSN/ID Number: \_\_\_\_\_

**Enrollment Level Change** Please select grade level:  Undergraduate/Post-Bacc  Graduate

Fall Term  Not Enrolled  Less Than ½ time  1/2-time  3/4-time  Full-time  Graduating  
Winter Term  Not Enrolled  Less Than ½ time  1/2-time  3/4-time  Full-time  Graduating  
Spring Term  Not Enrolled  Less Than ½ time  1/2-time  3/4-time  Full-time  Graduating

**Grade Level Change** – Requesting maximum award eligible to receive.

I am **NOW** a SOPHOMORE (45-89 credits)  I am **NOW** a JUNIOR (90 or more credits)

**Parent PLUS Loan Denied**

I am requesting the maximum subsidized/unsubsidized loans based on my grade level (Fresh=\$9500, Soph=\$10,500, Jr/Sr=\$12,500)

**Cancel My Loan for the Entire Year**  Subsidized  Unsubsidized  Graduate PLUS  Parent PLUS

**Subsidized Stafford Loan**

Reinstatement my student loan eligibility to the maximum amount.  
 Decrease my loan by \$\_\_\_\_\_ for what term(s) \_\_\_\_\_ for a total of \$\_\_\_\_\_ for the year  
 Increase my loan by \$\_\_\_\_\_ for what term(s) \_\_\_\_\_ for a total of \$\_\_\_\_\_ for the year  
 Revise my loan **FROM** [what term(s)]:  Summer  Fall  Winter  Spring **TO**  Summer  Fall  Winter  Spring  
(Your current loan disbursement schedule) (Your requested loan disbursement schedule)

**Unsubsidized Stafford Loan**

Reinstatement my student loan eligibility to the maximum amount.  
 Decrease my loan by \$\_\_\_\_\_ for what term(s) \_\_\_\_\_ for a total of \$\_\_\_\_\_ for the year  
 Increase my loan by \$\_\_\_\_\_ for what term(s) \_\_\_\_\_ for a total of \$\_\_\_\_\_ for the year  
 Revise my loan **FROM** [what term(s)]:  Summer  Fall  Winter  Spring **TO**  Summer  Fall  Winter  Spring  
(Your current loan disbursement schedule) (Your requested loan disbursement schedule)

Notes:

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Financial Aid Office**  
One University Blvd., La Grande, OR 97850  
Phone: (541) 962-3550 • Fax: (541) 962-3661  
Email: [loanprocessing@eou.edu](mailto:loanprocessing@eou.edu)  
Web: [www.eou.edu/fao](http://www.eou.edu/fao)

**OFFICE USE ONLY**