

2023-2024 PETITION FOR RE-EVALUATION

Name: Last		First	UID#						
aid	Please use this form to make or report any necessary changes to your current enrollment and/or financia aid awards. <i>A new electronic Financial Aid Notification (FAN) statement will be posted on MyUCLA\ when your awards are revised.</i> *								
	Requests must be submitted at least two (2) weeks prior to end of your enrollment period/term.								
LOAN ADJUSTMENTS									
	Cancel my loan disbursements for the following terms : □Fall □Winter □ Spring □ University Loan □ Subsidized □ Unsubsidized □ PLUS □ Grad PLUS □ Private □ CA Dream								
	I would like to convert my Federal Work-Study award into a loan.								
	Cancel my entire loan (you will be billed for funds already disbursed): ☐ University Loan ☐ Subsidized ☐ Unsubsidized ☐ PLUS ☐ Grad PLUS ☐ Private ☐ CA Dream *We can only cancel Direct Loans disbursed within 120 days from disbursement date.								
			vill be billed for funds already disbursed): ☐ Unsubsidized ☐ PLUS ☐ Grad PLUS ☐ Private						
	Please select the term(s) you would like to reduce loan for : \square Fall \square Winter \square Spring Please indicate the amount you would like the loan reduced by on the given lines below.								
	Reinstate a previously canceled loan: University Loan Subsidized Unsubsidized PLUS Grad PLUS Private CA Dream								
	I would like to request additional Parent Plus Loan. Any additional Parent Plus Loan will need the consent of the Parent before it can be offered. In some cases the Parent will need to submit another Parent Plus Application in order to process the loan.								
	Parent Signature_		Date						
	My parent was denie my maximum eligib		tance. Please award me an additional Unsubsidized loan up to						

** Yo	ANGES TO ENROLLMENT ST ou must be enrolled at least half-time (of nancial aid. Please be advised that charallation of financial aid.**	6 units for underg						
	I will not be enrolled for the: Academic Year	Fall	Winter	Spring				
	I have changed my enrollment status # of enrolled units for:	as shown below Fall	(do not leave bla	anks): Spring				
	I will be in the Reduced Fee Program (8-11 Units) for the following terms:							
	Please indicate the number of enro	olled units for:						
	Fall 2023							
	If enrollment is different than what is indicated above at our census date, you may be billed.							
NOTIFICATION OF ADDITIONAL ASSISTANCE Report any outside awards or graduate aid (includes fee waivers, fellowships, stipends, scholarships, Veterans benefits, etc.) not previously reported on your FAN that you will be receiving for the entire academic year. Please be advised that outside assistance may result in a reduction or cancellation of financial aid.								
	I will be receiving the following: <i>Name of Award</i>			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	t Signature		Date					
		HOW TO SUBM	TIL					
	Online to MyUCLA> click Finances and Jobs tab> unled and Scholarships click> View All Document Attach form as necessary.	Attn: UCL	Fax: Fax: 310-267-4143 Attn: UCLA Financial Aid and Scholarships					