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## 2020 - 2021 INFORMATION UPDATE FORM

Use this form to update the Office of Scholarships & Financial Aid on aid cancellation, enrollment status changes, adjustment requests, corrections, additional financial aid awards, and questions regarding your financial aid award.

ast Name			First Name		Middle Initial	
N	XXXXX	′ <u></u>	Student ID	Pho	one Number	
rre	nt Addre	ss				
<b>y</b> _			State _		Zip Code	
			Select term(	s) to update		
		Fall 2020 _	Winter 2021 _	Spring 202	21 Summer 2021	
		Comp	lete this section	<u>ո, then sign a</u>	and date	
		Cancel all finan	cial aid C	ancel specific fina	ancial aid (explain below)	
		Reinstate Aid	Ir	ncrease aid	Other	
	<b>Exp</b> - -					
	1)	Housing Status d	uring the 2020-202	1 academic ye	ar	
		On Campus/	Off Campus OF	R W	lith Parents	
	,	award? (Examples:		s, tuition assistar	listed on your financial aid nce, agency awards or Wisconsin	
		IF YES list name of	aid and the amount	:		
	Ì	ii 120, iist iiaiiic o				
	I certify t	that this information			ny knowledge. If I provide false iect to fine, prison or both.	