LA ROCHE UNIVERSITY

SUMMER 2024 GRADUATE REPLY FORM

The Financial Aid Office will assume that all awards are *ACCEPTED* by the student, as listed on the financial aid offer letter.

Students ***MUST*** complete this form **ONLY** if they are:

- ***DECLINING OR REDUCING*** Federal Direct loans;
- ***RECEIVING*** other types of aid that are not reflected on their award letter.

IF YOU NEED TO MAKE A CHANGE TO YOUR AWARDS, please return this form before the start of the semester to ensure your request is processed in a timely manner. You may submit this form anytime during the semester if changes are needed.

Student Information

Last Name:_____First Name:_____ID or SS#:_____

Home Phone:_____Cell Phone:_____

Federal Direct Loans

Federal Direct Unsubsidized Loan	[ ] I decline	[ ] Reduce to	$_____ for year.
Federal Direct Grad PLUS Loan	[ ] I decline	[ ] Reduce to	$_____ for year.
		[ ] Reduce to cover balance only.	

Other Aid

Report any other financial aid that does not appear on your financial aid offer, including but not limited to private scholarships, OVR, NEED, etc.

Type: _____ Amount: $_____

Type: _____ Amount: $_____

Type: _____ Amount: $_____

I certify that all information provided is accurate and complete. I will notify the Financial Aid Office of any changes in my enrollment status and any other aid I receive. I understand that any other aid that I receive that was not previously reported may affect my financial aid package.

Student Signature:_____Date:_____

Return to: La Roche University| Financial Aid Office|9000 Babcock Boulevard| Pittsburgh PA 15237
Phone: 412-536-1125| Fax: 412-536-1072