



evergreen

Change of Information

NAME: Last First MI A Student ID #

CONTACT INFORMATION: Address Phone
Address changes to the automated system must be made you through your my.evergreen.edu or Registration & Records

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I. CHANGES / ADDITIONAL INFORMATION & REQUESTS:

Use the back of this form for additional space

.....
II. ENROLLMENT:

For the [F] [W] [Sp] [Su] quarter of 20__, I will be enrolled in _____ credits per quarter.
(If 0, see WITHDRAWAL./Leave of Absence)

For the [F] [W] [Sp] [Su] quarter of 20__, I will be enrolled in _____ credits per quarter.

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III. WITHDRAWAL/Leave of Absence: Enrolled in 0 credits.

I want 100% of my financial aid returned to the funding sources. (I will pay any charges myself.)

or

I will have all of my instructors complete a Last Day of Attendance Memo. This will be used to determine changes to my eligibility for financial aid (available from the Financial Aid Office).

Signature

Date

1/2016

Office of Financial Aid