

UHD ID: _____ Student's First Name: _____ Last Name: _____



Office of Scholarships and Financial Aid
2026-2027 Revision Request Form

When your current information does not match what is on file with the Financial Aid Office, a Revision Request Form is required to update your student account.

What you need to do:

1. Please check and complete **only** the section(s) that pertain to your revision request.
2. Submit this form to the Office of Scholarships and Financial Aid. **Allow up to 2 weeks for processing.**

<input type="checkbox"/> Cancel Financial Aid		
Please indicate which term you wish to cancel aid.		
<input type="checkbox"/> Fall 2026	<input type="checkbox"/> Spring 2027	<input type="checkbox"/> Both

<input type="checkbox"/> Change of Graduation Date
Date you expect to complete your degree/program (mm/yy): _____/20_____
If graduating in December, how many hours are you enrolled in for Fall 2026? _____ hours

<input type="checkbox"/> Reinstate Financial Aid	
If you have been informed that you can reinstate cancelled or declined aid, please indicate the semester below.	
<input type="checkbox"/> Fall 2026	<input type="checkbox"/> Spring 2027

<input type="checkbox"/> Change of Housing Status	
<input type="checkbox"/> Off Campus	<input type="checkbox"/> Living With Parents

<input type="checkbox"/> LOANS				
Please Specify	Additional	Reinstate	Cancel	Amount
Subsidized Stafford Loan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Unsubsidized Stafford Loan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

Certification	
My signature affirms that all information submitted to the Office of Scholarships and Financial Aid, for the purpose of determining my eligibility for financial aid, is true and correct to the best of my knowledge.	
Signature <i>(Blue or black ink, no electronic signatures accepted)</i>	Date

UHD Scholarships and Financial Aid | One Main St, Ste. 350-S | Houston, TX, 77002

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