Award Adjustment Form 2024-2025

College for Creative Studies

Office of Financial Aid

finaid@collegeforcreativestudies.edu

Phone: 313.664.7495 Fax: 313.664.7499 Main Campus 201 E. Kirby St. Detroit, MI 48202 Yamasaki Building

Last Name	First Name	MI	CCS ID Number
Please complete this fo	orm if you are requestin	g to increase/	decrease/decline an award or your enrollment hours.
**Note that all Federal S Service and that this fo			ards must be accepted or declined through Self
l. Increase/Decr	ease/Decline Awa	ard Amour	nts
Federal Unsubsid	ed Loan (only if accepted the dized Loan (only if accepted as based on a grade level PLUS Loan (original paren	through Self Serv change (Freshm	
II. Change in En	rollmont Hours		
In this section, please incindication will allow the F Fall Semester Number Semester Winter Semester Certifications and S	dicate if you are or plan to inancial Aid Office to adjust a modern of Credits Number of Credits Signatures	ist your aid base	ester less than full-time (11 credits or below). This ed on your current/anticipated enrollment status equested are complete and accurate.
Student Signature			Date
Parent Plus Loan Born	ower Signature (if appli	cable) 	
WAF	RNING: It is a Federal of	fense to purpos	sely falsify any information on this form