

**West Virginia State University  
Office of Financial Aid and Scholarships  
2024-2025 Changes to Award Form**

\_\_\_\_\_  
Last Name    First Name    Middle Initial    Student ID Number

\_\_\_\_\_  
Telephone Number (Including Area Code)    Email Address

I am or will be enrolled for the following semesters:

**Fall Only**\_\_\_\_\_      **Spring Only**\_\_\_\_\_      **Fall and Spring**\_\_\_\_\_

**SECTION I: Award Acceptance for Aid Year 2024-2025**

- I would like to accept the student loans that have been offered on my financial aid award. Please indicate the **exact amount** you would like to receive if it is different than the original amount that has been offered. (Not to exceed the maximum fund limits)

\$ \_\_\_\_\_      \$ \_\_\_\_\_      \$ \_\_\_\_\_  
Subsidized Loan Amount      Unsubsidized Loan Amount      Parent PLUS Loan Amount

**SECTION II: Award Decline for Aid Year 2024-2025**

- I would like to decline the following award:

\_\_\_\_\_ Subsidized Loan      \_\_\_\_\_ Unsubsidized Loan      \_\_\_\_\_ Plus Loan

---

The Financial Aid Counselor advised me of the total amount of student loan funds that I have borrowed and we discussed my estimated payment amounts.

Yes    No

My signature below authorizes West Virginia State University to credit my student account with funds from my award to cover all charges for the appropriate term, and indicates my understanding and agreement to all terms outlined in the Conditions of Award.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

West Virginia State University  
106 Ferrell Hall, PO Box 1000 Institute, WV 25112  
Telephone: 304-204-4369 \* Fax: 304-766-3335  
[ofa@wvstateu.edu](mailto:ofa@wvstateu.edu)