

# SUMMER 2010 HOURS REVISION/STATUS CHANGE FORM

*Failure to complete this form will delay the processing of your aid.*

**ONLY ONE (1) REVISION WILL BE MADE TO YOUR FILE PRIOR TO THE START OF YOUR FIRST CLASS. IF YOU TURN IN ANOTHER FORM, YOUR AID WILL NOT DISBURSE UNTIL AFTER YOUR FIRST CLASS.**

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Soc. Sec. #

\_\_\_\_\_  
EIU ID#

\_\_\_\_\_  
Local Address

\_\_\_\_\_  
Local Telephone

\_\_\_\_\_  
Email

What will be your grade class level when you begin the Summer Semester of 2010? Check one.

Freshman  
(0-29 hours)

Sophomore  
(30-59 hours)

Junior  
(60-89 hours)

Senior  
(90+ hours)

Graduate

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DO NOT COMPLETE THIS FORM UNTIL AFTER YOU REGISTER FOR THE HOURS INDICATED BELOW:**

**Summer 2010 I AM NOW REGISTERED FOR THE FOLLOWING HOURS:**

\_\_\_\_\_ Number of Hours ON CAMPUS

\_\_\_\_\_ Number of Hours through the SCHOOL OF CONTINUING EDUCATION (OFF CAMPUS)

\_\_\_\_\_ Total Number of Cumulative Hours (Credit Hours at the beginning of the Summer Semester.)

\_\_\_\_\_ PLEASE INCREASE MY FEDERAL LOANS BECAUSE MY GRADE/CLASS HAS INCREASED SINCE SPRING 2010. (MARK WITH AN "X")

**You must fill in the # of hours above in order for your summer application to be processed.**

**NOTE: I understand that if these reported hours do not match my scheduled hours at the time of revision, this request will be destroyed and I MUST complete another Hours Revision Form.**

**STUDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_**  
**HRSS** Eastern Illinois University 600 Lincoln Ave Charleston, IL 60920. 217-581-6422 (fax)