



Financial Aid | 12401 SE 320th St, Auburn, WA 98092 | 253-833-9111 (2449) | FAX 253-288-3473 | ✉: finaid@greenriver.edu

Name: _____

Last Name , First Name

Student ID: _____

Phone Number: _____

Available day/time for phone call:_____

Date of change/loss: _____

Please check the item which best fits reasoning for change

of financial circumstances:

- ☐ Loss or change in employment
- ☐ Loss of parent/spouse
- ☐ Marital separation or divorce
- ☐ Non-recurring 2017 income – IRA or pension distributions, inheritance, unemployment benefits, other capital gains
- ☐ Non-reimbursed medical/dental expenses
- ☐ Change in household size
- ☐ Other

Please use the space below or a separate page to provide a detailed statement explaining changes that occurred, including current circumstance:

[illegible]

Upon submitting this request, you will receive a phone call to discuss the change of financial circumstances and be notified about what type(s) of documentation are needed for review.

By signing this form I am certifying that the information I will provide is true. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancellation or repayment of financial aid, whenever discovered.

Student Signature _____ Date _____