



MONTANA STATE UNIVERSITY NORTHERN

CREDIT CHANGE FORM 2024-2025

Name: _____ SSN / ID: _____

I am requesting the Financial Aid Office adjust my 2024-2025 Financial Aid Offer based on a change in my enrollment plans. I understand my existing Financial Aid Offer may be modified as a result of this change.

(NOTE: View your revised Financial Aid Offer on *BannerWeb/MyInfo*.)

For ALL terms during the 2024-2025 academic year listed below, circle the number of credits for which you will be enrolled. **Summer credits changes may not be made until after registration for Summer term.**

Fall Term 2024
12 or more credits
9-11 credits
6-8 credits
1-5 credits
0 credits

Spring Term 2025
12 or more credits
9-11 credits
6-8 credits
1-5 credits
0 credits

Summer Term 2025
12 or more credits
9-11 credits
6-8 credits
1-5 credits
0 credits

By my signature below, I certify that I understand my financial aid will be based on my enrollment status at the end of the drop/add period each term and that the Financial Aid Office will make any adjustments necessary based on my enrollment status.

Student's Signature

Date

MSU Northern Financial Aid Office
PO Box 7751 ~ Havre, MT 59501
Tel: (406) 265-3787 Fax: 406-265-3519
Email: finaid@msun.edu