

Office of Financial Aid 450 Schoolhouse Road Johnstown, PA 15904 Phone: 814-269-7045 Phone: 800-881-5544 Fax: 814-269-7061 Email: upjaid@pitt.edu

## 2020-2021 INFORMATION UPDATE

Section 1: Student Information Student Name:	Student ID Number:			
Section 2: Housing Status and Enrollment Information Please indicate your intended housing and enrollment status	for both the fall and s	spring semeste	rs.	
Fall 2020		Spring 2021		
<ul> <li>□ University Housing</li> <li>□ Commuter (living with parent/relative)</li> <li>□ Off-Campus* (living in own apartment/home)</li> <li>□ 12+ credits</li> <li>□ 6-11 credits</li> <li>□ 5 or less credits</li> <li>□ Not enrolled</li> <li>Expected graduation date:</li> <li>□ December</li> <li>□ Ap</li> </ul>	□ University Housin □ Commuter (living □ Off-Campus* (living □ 12+ credits □ 6-11 credits □ 5 or less credits □ Not enrolled ril □ June	g with parent/rela	ment/home)	r
Section 3: Additional Funding  Are you a dependent or spouse of a University of Pittsburgh employer you a dependent or spouse of a UPMC employee?  Does your employer reimburse all or a percentage of your tuition? (Please provide an estimated amount in the grid below)  If you are the recipient of a scholarship or grant from a source outsic please indicate the source and the amount below. This includes privational short if processory.	le of the University of Pi			
employer. Attach additional sheet, if necessary.  Source	Amount		heck Term/Ye	ar
Source	Amount	☐ Fall Only	Spring Only	☐ Full Year
		☐ Fall Only	☐ Spring Only	☐ Full Year
		☐ Fall Only	☐ Spring Only	☐ Full Year
		☐ Fall Only	☐ Spring Only	☐ Full Year
If you are receiving funding from an outside source, will the funding by Section 4: Student Certification  I will not attend the University of Pittsburgh during the 2020–2		the student? 🏻	Yes	□ No
☐ Adjust Aid:	-			
Type of Aid From \$ to \$	□ Fall only □	Spring only	□ Academic	c Year
Type of Aid From \$ to \$ Type of Aid From \$ to \$	☐ Fall only ☐		<ul><li>□ Academic</li><li>□ Academic</li></ul>	
By Signing below:	L ranomy L	Spring only	- Academic	c rear
<ul> <li>I certify that all of the information provided on this financial aid ac purposely give false or misleading information, the Financial Aid O the U.S. Department of Education's Ombudsman or University of F</li> <li>I attest that I will use my financial aid and/or any refund of my fina</li> <li>I understand that if my financial aid does not satisfy my balance does I am aware that I must immediately notify the Financial Aid Office it that I receive, and I understand that such awards may reduce my i</li> <li>I acknowledge that the Financial Aid Office has the right, at any timor resolve awards in excess of need or the established cost of atternal</li> </ul>	ffice has the right to can Pittsburgh's Judicial Affair ncial aid for my educatic ue, I am responsible for t in writing of both the sou nitial financial aid packagne, to reduce or cancel av	cel my financial a rs Office. onal-related expe the payment of th urce and the amo ge.	aid or to file a consess. The remaining dount of any out	complaint with lebt. side funding

FORM ID: F21IU REV:12.09.19