



# Instructions for Completing the Grant Record Change Form for Students

## Section 1 — Student Information (This section and Section 4 must be completed)

1. Enter your name (current last, first, middle initial). If you indicated a name change in question #1, please provide your **previous** name (last, first, middle initial) in the shaded box. Remember to print or type clearly.
2. Enter your social security number. If your social security number is a change from Commission records, enter your correct number and *attach a copy of your social security card*.
3. Enter your date of birth (month, day, year).
4. Enter your telephone number, including area code.
5. Check “Yes” if your address is different from the Commission’s records. Check “No” if your address is the same as the Commission’s records. Enter your street address, city, state and five- or nine-digit zip code.

## Section 2 — School Change

6. If you wish to change your school of attendance, enter the school’s name, city and date effective. **A change in school choice may effect your eligibility for an award.**
- 7a. Enter the term the change in school choice is effective.
- b. Check whether you will live on campus, off campus, or at home with parents or relatives.

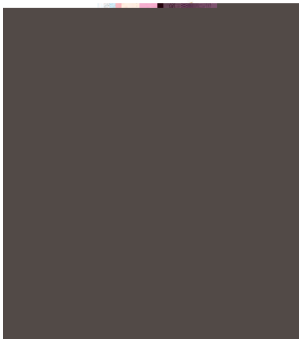
## Section 3 — Leave of Absence Request

8. Enter the school you attend or have attended most recently and the date and term you last attended (e.g. 12/05, Winter 2005). Also enter the terms for which you are requesting a leave of absence (e.g. Fall semester), and the exact date for which you are requesting a leave of absence (e.g. 9/15/05 to 12/15/05).
9. Print or type the reason(s) for your leave of absence request.

## Section 4 — Student Signature (To avoid delays, sign, date, and mail or fax this form as soon as possible.)

10. Your signature certifies to the best of your knowledge that this information is true and correct. **Providing false information may result in the withdrawal of your award.**

If you have any questions concerning this form, you may contact the Commission’s Customer Service Branch by calling (888) 224-7268 or, via e-mail at [custsvcs@csac.ca.gov](mailto:custsvcs@csac.ca.gov). Our office hours are 8:00 a.m. to 4:50 p.m., Monday through Friday, except Thursday. Office hours on Thursdays are 9:00 a.m. to 4:50 p.m. You may fax a copy of the form to (916) 526-8002 or mail your form to:



**California Student Aid Commission  
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