



Financial Aid Office
 5150 N. Maple Avenue, M/S JA 64
 Fresno, CA 93740-8026
 Phone: (559) 278-2182 Fax: (559) 278-4833

Filing Deadline 4/1/12
Attendance/Resource Update

STUDENT ID	LAST NAME	FIRST NAME	PHONE NUMBER (with area code)
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Please report additional "resources" NOT included on your Award Notification. Resources may include, but are not limited to: **Fee Waivers, ROTC allowances, Scholarships, Veteran's Benefits, Stipends and Cal Grants.**

I am receiving the following: **\$ Amount**

All financial aid recipients have the right to selectively accept or reject any offer of aid without penalty. **If you wish to reject any part of our offer, please complete the following.**

I reject: Work-Study Perkins Loan Nursing Loan

I will NOT attend California State University, Fresno in **2011-2012** for:

Entire Academic Year Fall 2011 Spring 2012

I will ATTEND **FALL** **SPRING**

¾ time (9-11 units) ¾ time (9-11 units)

Half time (6-8 units) Half time (6-8 units)

I understand that proration rules are in effect for less than Full Time students which may result initially in a reduced amount being disbursed.

Student Signature _____ Date _____