2015 – 2016 PELL ADJUSTMENT REQUEST:
Information and Instructions

The purpose of this form is to request an adjustment to the Pell Grant for the current term if an institutional error on the part of Lane Community College prevented a student from being enrolled in the correct number of credits at the time the student’s Pell Grant award was calculated for the term. In accordance with federal regulations, Pell Grant adjustments cannot be made at Lane Community College for any reason other than institutional error. Adjustments will be considered for the current term only. Requests received after the end of the term will not be processed.

Instructions for students:
Complete the Student Section of the form, and then give the form to your instructor to complete the Instructor Section.

Instructions for instructors:
Once the student has completed the Student Section, complete the Instructor Section. You may then return the form to the student to submit to Financial Aid, or you may submit it to Financial Aid on the student’s behalf.

What to expect:
Once the completed form has been received and entered into Lane’s computer system, students can view the status of the request in myLane. Please allow 2-4 weeks for processing.

- On the myFinances tab, look for the Financial Aid Requirements box, which should be in the upper right section of the page.
- Click on Student Requirements, and select the current aid year.
- Once it has been received, the “Pell Adjustment Request” will appear, and the status will be “completed” after the review is complete.
- If the adjustment is approved, you will see the change reflected in your Pell Grant disbursement within 7 days in the “myAccount” box (located at the upper left of the myFinances tab).
- If the adjustment is denied, you will receive a message in “Overall Financial Aid Status and Active Messages” (located in the “Financial Aid Requirements” box in the upper right section of the myFinances tab). Messages will be posted for one week only, so please be sure to check on your status at least once per week to avoid missing important information.
# 2015 – 2016 PELL ADJUSTMENT REQUEST

## STUDENT SECTION:

<table>
<thead>
<tr>
<th>NAME:</th>
<th>L#:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last</td>
<td>First</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>COURSE NUMBER:</th>
<th>COURSE TITLE:</th>
<th>TERM</th>
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</table>

**STUDENT COMMENTS (optional):**

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

**STUDENT SIGNATURE:** ________________________  **DATE:** ______________

## INSTRUCTOR SECTION:

<table>
<thead>
<tr>
<th>INSTRUCTOR’S NAME:</th>
<th>INSTRUCTOR’S EMAIL:</th>
</tr>
</thead>
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**INSTRUCTOR’S DAYTIME PHONE NUMBER(S):** ________________________

**Check the box that best describes the student’s situation:**

- [ ] The student was administratively withdrawn from the class.
  - [ ] Did the student attend all classes in the first week of the term?  [ ] YES  [ ] NO
  - [ ] If not, do you drop students who miss classes during the first week?  [ ] YES  [ ] NO
  - [ ] Was the student appropriately dropped based on your attendance/drop policy?  [ ] YES  [ ] NO  [ ] N/A

- [ ] The student could not register for the class prior to NOON on TUESDAY of week two.
  - [ ] Did the student need to complete testing or other pre-registration requirements?  [ ] YES  [ ] NO
  - [ ] Could the student have met these requirements prior to noon on Tuesday of week two?
    - [ ] YES  [ ] NO  [ ] N/A
  - [ ] Was the student unable to register on time because the class was full?  [ ] YES  [ ] NO
  - [ ] Did the student attend classes prior to noon on Tuesday of week two?  [ ] YES  [ ] NO

- [ ] The student was not registered for the class prior to noon on Tuesday of week two because of an error made by the College not listed above. Please describe the situation in detail.

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

**Additional Instructor comments (optional):**

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

**INSTRUCTOR SIGNATURE:** ________________________  **DATE:** ______________

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**RETURN TO FINANCIAL AID BY MAIL, FAX, DROP BOX LOCATED IN BLDG. 1 LOBBY, OR EMAIL**