Tennessee Student Assistance Corporation
Change of Institution Request

Name: ________________________________ SSN: XXX - XX - _____ (Please print first and last name clearly)

Email: ________________________________ Phone #: (999) 999-9999

Transfer my award to: ____________________________ Academic Year: ________ (Name of College or University)

NOTE: The use of this form does not change the institution order found on your Free Application for Federal Student Aid (FAFSA). If you make a change to your FAFSA, please ensure your school choice is listed first.

Semester(s) affected:  □ Summer  □ Fall  □ Winter  □ Spring  (Check all that apply)

Programs: (Check all that apply)

□ Christa McAuliffe Scholarship  □ Tennessee Byrd Scholarship Program
□ Dependent Children Scholarship  □ Tennessee HOPE Scholarship
□ Dual Enrollment Grant  □ Tennessee HOPE Access Grant
□ Graduate Nursing Loan Forgiveness Program  □ Tennessee HOPE Foster Care Grant
□ Helping Heroes Grant  □ Tennessee Math & Science Teachers Loan Forgiveness
□ Minority Teaching Fellows Loan Forgiveness Program  □ Tennessee Promise Scholarship
□ Ned McWherter Scholars Program  □ Tennessee Student Assistance Award
□ Wilder-Naifeh Technical Skills Grant  □ Tennessee Teaching Scholars Loan Forgiveness Program
□ Wilder-Naifeh Reconnect Grant

Signature of Student: ________________________________ Date: ________________

Mail this form to the address below or fax to (615) 741-6101.

Tennessee Student Assistance Corporation
404 James Robertson Parkway, Parkway Towers Suite 1510
Nashville, Tennessee 37243-0820
(800) 342-1663 or (615) 741-1346
www.tn.gov/collegepays

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