

2018-2019 Request for Additional Student Unsubsidized Loan due to Parent PLUS Loan Denial

Student Name			ID#
Please complete form in blue or black ink. Inco	omplete forms will no	t be accepted.	
According to our records, a Parent PLUS loan on your behalf has been denied by the Department of Education.			
This form will serve to authorize Lake Supin your name, for the amount eligible, as a			
Parent Section:			
I have read and understand the enclosed letter from LSSU which further describes my options. I understand that my PLUS loan application has been denied by the Department of Education. I choose not to appeal the decision or to seek an endorser for the loan. I understand that if my credit rating changes and my request for a PLUS loan is approved, the student loan will be cancelled in accordance with federal regulations.			
Parent Borrower - Name (Print)			
Parent Signature or FAO	Date	of Parent ir	nid Officer Signature in lieu Indicates FAO has fully Idenial process to Parent.
Student Section:			
I have read and understand the enclosed I my financial aid application to be processed Department of Education, in replacement of be the same as the PLUS loan amount was determined by the cost of attendance and	ed for an additional of the Parent PLUS is, or as indicated l	unsubsidized dir S which has been	ect loan through the denied. The amount should
Student Signature	Date		
\$ Amount Requested			
(The maximum limit is \$4000 for Freshmer students.)	n and Sophomore,	and \$5,000 for Ju	unior and Senior level

Internal use **ONLY**

Reviewed:_____Scanned: _____

ADDUNS-A3

RETURN FORMS TO:

Lake Superior State University
Financial Aid Office
650 West Easterday Avenue

Sault Ste. Marie, MI 49783-1699 Phone: 906-635-2678

Fax: 906-635-6669 Email: finaid@lssu.edu