

REQUEST FOR ADDITIONAL LOAN FUNDS

Office of Financial Aid and Scholarships • Indiana University South Bend • P.O. Box 7111 • South Bend, IN 46634-7111

Phone: (574)520-4357 Fax: (574) 520-5561 Email: sbfinaid@iusb.edu Website: financialaid.iusb.edu

Print Name		Student ID Number
_	nding awareness, students are re NSLDS) at <u>nslds.ed.gov</u> prior to re	required to view their current loan debt on the National equesting additional loan funds.
Note: Your cumulative amount		ed on the NSLDS website:est to be denied unless you have reached your annual or maximule determined at the time your appeal is reviewed.
Loans requested for the Fall or request.	Spring only may be processed for th	ne Academic Year if that action allows us to process your full
(Select <u>one</u> term) Term	(Expected Grad Date	Summer Session(s)
	bmit, along with this request,	Permanent Disability? No Yes a new Borrower Acknowledgment Form which is
Loan amount requested*	\$	<u> </u>
•	n has already been processed fo only the <u>additional</u> amount red	for all or part of the period for which you are requestin equested.
By checking this box I a	am submitting my digital signa	ature and certify that I am the student listed above
Student Signature (require	ed for paper submission)	Date
Note: Appeals are reviewe	ed in order of date received an	nd after all standard applications have been processed

The deadline for filing a request is three weeks prior to the end of the semester/term. Failure to submit a request by the posted deadline may result in denial of request.