Office of Financial Aid
112 College Road
Loch Sheldrake, NY 12759
Email:finaid@sunysullivan.edu
Fax: (845)434-0014

Student ID#: _____

Request for Additional Unsubsidized Federal Direct Loan (PLUS Denial) 2024-2025

I, _____, wish to borrow an additional "Unsubsidized Federal Direct Loan" for the 2024-2025 academic year in the amount of $_____ to be used for living expenses as a result of my parent being denied a Federal Parent Loan for Undergraduate Students (PLUS Loan).

I further understand I am the borrower and that I am responsible for interest on this loan during in-school periods. I understand that if I do not pay the interest while attending college, the interest will be added to the principle amount borrowed (capitalization).

_____ _____

Date **Student's Signature**

OFFICE USE ONLY

_____ **Disburse Dates #1**_____ **#2**_____

Approved Unsubsidized Amount

___ Full Time ___ 6 – 11 Credits ___ Dependent (PLUS Denied)

___ 1st Year Never Attended ___ 1st Year Returning ___ 2nd Year

Loan Period _____ **FA Initials**_____