



INDIANA UNIVERSITY
SOUTH BEND

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 _____

To encourage educational funding awareness, students are required to view their current loan debt on the StudentAid.gov site at studentaid.gov prior to requesting additional loan funds.

Please enter the amount of your outstanding debt as reported on the Studentaid.gov website: _____

Note: Your cumulative amount borrowed will not cause this request to be denied unless you have reached your annual or maximum loan limit. Eligibility and availability for the requested funds will be determined at the time your appeal is reviewed.

Loans requested for the Fall or Spring only may be processed for the Academic Year if that action allows us to process your full request.

(Select one term)

Term *Academic Year* *Summer Session(s)*
of *Fall only (Expected Grad Date _____)*
Request: *Spring only*

Have you ever had a loan discharged due to Total and Permanent Disability? No Yes

If yes, you must submit, along with this request, a new Borrower Acknowledgment Form which is available from our office.

Loan amount requested* \$ _____ (whole dollar amounts only)

**If a Federal Stafford Loan has already been processed for all or part of the period for which you are requesting additional funds, indicate only the additional amount requested.*

By checking this box I am submitting my digital signature and certify that I am the student listed above

Student Signature (required for paper submission)

Date

Note: Appeals are reviewed in order of date received and 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.***