



Office of Financial Aid

2900 Bedford Ave. • Brooklyn NY 11210

TEL: 718-951-5051 • FAX 718-951-4778

www.brooklyn.cuny.edu

2014-2015
Federal Parent PLUS Loan Denied
Additional Unsubsidized Loan Request

Student Name _____ Social Security # _____

Telephone Number _____

Parent Information

I, the Parent Borrower, have been denied a Federal Parent PLUS Loan and I will not seek an Endorser or the Endorser has been denied.

Parent Name _____ Social Security # _____

Parent Signature _____ Date _____

Student Information

Freshman/Sophomore (academic year maximum \$4,000)

Junior/Senior (academic year maximum \$5,000)

I request to be considered for an additional Unsubsidized Loan. Please indicate requested amounts below

Loan Period	Summer 2014	Fall 2014	Spring 2015
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Requested Amount \$ _____

Student Name _____ Social Security # _____

Student Signature _____ Date _____

