

PLUS Loan Appeal Form

Please submit this form and supporting documentation to the CSU financial aid office at the address below, fax it to 570.585.9366, or email it to financialaid@clarkssummitu.edu.

A parent who is approved for a PLUS loan may appeal the approval if they can provide a valid explanation of why they cannot afford to take the loan.

Student Name _____ **Student ID** _____

Income vs. expenses:

<i>Income</i>	<i>Amount Per Month</i>
Work	\$
Unemployment Benefits	\$
Child Support	\$
Workers' Compensation	\$
Social Security	\$
Soc Sec Disability	\$
Alimony	\$
Business Income	\$
Other Income	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total	\$

<i>Expenses</i>	<i>Amount Per Month</i>
Housing	\$
Food	\$
Child Care	\$
Child Support Paid	\$
Utilities	\$
Credit Cards	\$
Medical/Dental	\$
Transportation	\$
Self-Employment Tax	\$
Insurance	\$
Education Expenses	\$
Other Expenses	\$
Education Loan Pymts	\$
Other Loan Pymts	\$
Total	\$

Supporting Documentation

On a separate sheet of paper, please provide a signed statement detailing the circumstances that show your inability to afford a PLUS loan. These circumstances could include, but are not limited to: bankruptcy, foreclosure, underwater mortgage, loss of income due to layoff or loss of hours, significant outstanding debts, significant expenses, etc. Additional documentation may be requested based on your statement.

Statement of Certification

By signing this document, I certify that all information provided is complete and accurate to the best of my knowledge.

Parent Signature _____ **Date** _____

For office use only

Date Received	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Director Name
Verification Status	Date	Director Signature

