

Office of Student Financial Assistance Lucas Administration Center 416 Nunn Drive Highland Heights, KY 41099 Office: 859-572-5143

Fax: 859-572-6997 ofa@nku.edu

REQUEST FOR ADDITIONAL DIRECT LOAN SUBSIDIZED/UNSUBSIDIZED 2023 - 2024

Student Name (last, first)	Please Print	Student ID Number
LOAN PERIOD		
Check one:		
☐ Academic year* ☐ Fall ON	NLY Spring ONI	LY Summer
*Loan amounts for an academic year loan will be divide	d evenly between the fall and spring semesters	5.
\$ Subsidiz	ed	
\$ Unsubsid	lized	
	CERTIFICATION	
I authorize Northern Kentucky Univers information pertinent to this Ioan (e.g.		
Loan recipients who drop below half time enrollment of Student Financial Assistance for further details.	ent are subject to a cancellation of subseq	•
Student Signature	Phone Number	Date
Per phone request		
Per email request		
PLUS Denial Coordinator Initials Credit check attached	F □Staff Reviewed □ Mail	FOR OFFICE USE ONLY Process Date:
Credit denial in ProSAM	□ Fax □ E-Mail	Initials