



**SOUTHERN UNIVERSITY AT NEW ORLEANS**  
**Office of Student Financial Aid**  
**6400 Press Drive**  
**Emmett Bashful Administration Bldg. Rm. 210**  
**New Orleans, Louisiana 70126**  
**Telephone: (504) 286-5263 Fax: (504) 286-5213**  
**Webpage: <http://suno.edu/financial-aid-2/>**

## **Parent PLUS Loan Denial Form (NON CO-ENDORSER FORM)**

Student Name: \_\_\_\_\_ SUNO ID Number: \_\_\_\_\_

This form is only to be completed *after* a parent has been credit denied for the Federal Direct PLUS Loan. To apply for the Parent PLUS loan, a parent must have already completed and submitted an application at [www.studentloans.gov](http://www.studentloans.gov) and received a decision.

### **PARENT INFORMATION**

*(This section to be completed and signed by the Parent Borrower)*

- I, the Parent Borrower, have not and will not seek an endorser (co-signer) for the Parent PLUS Loan.
- I, the Parent Borrower, will not seek a credit over-ride decision.

\_\_\_\_\_  
Parent Borrower Name (PLEASE PRINT)

\_\_\_\_\_  
Parent Borrower Social Security Number

\_\_\_\_\_  
Parent Borrower Signature

\_\_\_\_\_  
Date

### **STUDENT INFORMATION**

*(This section to be completed and signed by the Student Borrower)*

- I, the student, request to be considered for the additional Federal Direct Unsubsidized Loan. I understand that I am only eligible for the additional Federal Direct Unsubsidized Loan if the Parent PLUS Borrower is not seeking an endorser (co-signer) or credit over-ride, or if the endorser (co-signer) was denied.

\_\_\_\_\_  
Student Name (PLEASE PRINT)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Please mail or fax completed form to:

**Southern University at New Orleans**  
**Office of Student Financial Aid**  
**6400 Press Drive Rm. 210**  
**New Orleans, Louisiana 70126**  
**Fax: (504) 286-5213**

Office Use ONLY:

Processor: \_\_\_\_\_

Date: \_\_\_\_\_