

**Whitworth University Financial Aid Office**

300 West Hawthorne Road, Spokane, WA 99251  
509.777.3215 509.777.4601 (fax)

**REQUEST FOR ADDITIONAL FUNDING**

Student's name \_\_\_\_\_ Student I.D. # \_\_\_\_\_ Phone # \_\_\_\_\_

Current year in college: 1 2 3 4 Teach Cert Graduate

Before completing this form, please consider this option first.

- Dependent students only, has your parent applied for a Parent (PLUS) loan? If a parent is denied the PLUS loan due to credit reasons, then students are eligible to borrow additional funds from the unsubsidized loan program.

Additional funding for which you may be considered will be:

- Unsubsidized Stafford Loan
- Whitworth Institutional Loan – subject to credit approval by the Institutional Loan officer based on credit bureau report

To request additional funding through financial aid, please complete the following:

**THE TOTAL AMOUNT OF THIS REQUEST IS \$ \_\_\_\_\_, for \_\_\_\_Fall\* \_\_\_\_Spring Semester(s).**

\*If Fall semester only, how will you cover spring's expenses? Please answer below.

REASON FOR REQUEST OF ADDITIONAL FUNDING: check all that apply

- cover balance on student account       off-campus housing       child care
- transportation       medical       other \_\_\_\_\_
- study-abroad program for \_\_\_\_\_ semester, to \_\_\_\_\_ location.

Please explain the reason you need to borrow additional funds. The expense must be incurred during the academic year in which you are applying for the additional funds. Please be very specific in describing your need. It is important for the advisor to know as much information as possible as to why you are experiencing financial difficulty. It is our goal to review these requests with as much objectivity as possible since we will be adding additional loan debt to what you may have already borrowed.

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Student's signature \_\_\_\_\_ Date: \_\_\_\_\_

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Financial Aid Office Use Only: LCO>1<sup>st</sup> yr

Advisor's signature \_\_\_\_\_ Date: \_\_\_\_\_