## Please contact our office for assistance completing this form.

## **Suffolk University**

• Office of Student Financial Services • 73 Tremont Street • Boston, MA 02108 617-573-8470 • 617-720-3579 (fax)

## 2025-2026 Unsubsidized Direct Loan for Dependent Student

Studen	ıt's Name	Student ID
	unusual circumstance that	(e.g. UID009999999) es not contain parental information and you did not indicate you prevents you from contacting your parent(s) or obtaining parental
funding for	or the 2025-2026 acaden	nly wish to be considered for Federal Direct Unsubsidized Loan nic year. This means that you will not be considered for any other leral Pell Grant, Federal Direct Subsidized Loan or Federal Work ased funding.
Please che	eck one and follow the ins	structions that apply:
	sidered for federal unsubstitute of the sidered for federal unsubstitute of the sidered for federal unsubstitute of the sidered for federal unsubstitute of federal unsubstitu	ent information on FAFSA, and understand that I will only be sidized loan and no other federal or institutional aid.  Statement from parent(s) indicating they are unwilling to provide 5-2026 FAFSA or a signed statement from parent(s) indicating they de any financial support to you, the student.
fede	eral and institutional aid p	de parent information on FAFSA in order to be considered for all rograms.  FSA at studentaid.gov and select "make a correction" to add
Student's	Signature	Date

A "wet signature" is required, electronic signature will not be accepted.