University of Detroit Mercy
2020 Summer Financial Aid Application

This application **must** be completed if you want to receive summer financial aid. You must be registered for all summer classes by **May 4, 2020**, or your aid will be cancelled.

*Awarding for Summer Aid will begin in February 2020*

Please check all programs you would like to receive if eligible. By checking the loans below you are authorizing us to create these loans in your name.

- [ ] Subsidized Stafford Loan
- [ ] Unsubsidized Stafford Loan
- [ ] Grad PLUS Loan (this loan is a credit based loan, and by selecting it you are requesting a credit check)
- [ ] Federal Work-Study (if funds available)

**Please indicate which amount you want for all loans above?** (amount requested is not guaranteed)

- [ ] Maximum I am eligible to receive (Fall loans may be reduced)
- [ ] Cover tuition, fees and books only
- [ ] Cover credits indicated below (Make sure to give us accurate data below)
- [ ] Other amount $________

**Other Financial Aid Available**

Federal Parent PLUS Loan (dependent students only):
A new Parent PLUS Loan application must be submitted for the summer term. This can be done at [www.studentloans.gov](http://www.studentloans.gov).

Alternative Loans:
Alternative loans must be approved through a lender of the students choice. A new application must be completed for the summer semester. Please see your financial aid counselor for more information.

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**Student Name:** ________________________________________   **Student ID:** __________________

**Will you graduate this summer?**    **Yes**    **No**

For this period of school, I will be living: [ ] in Dorm    [ ] in Own home/apt    [ ] With parents/relatives

I will be enrolling for the following number of credit hours **(LIST ACTUAL # of CREDIT HOURS):**
- Summer Term I (5/4-6/20) must be submitted on or before May 18, 2020: _______
- Summer Term II (6/22-8/6) must be submitted on or before July 6, 2020: _______
- Summer Term III (5/4-8/6) must be submitted on or before July 6, 2020: _______

**Will you attend a study abroad program this term?**    **Yes**    **No**

List Program:_____________________

Please let your Financial Aid Counselor know of any changes to your application, ASAP.

Failure to complete at least 60% of the term will result in reduction of federal aid, including loans.

**Student Signature:** _______________________________________   **Date:** ____________

**Phone #:** ___________________________   **Major:** ______________________________

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