

## PARENT PLUS OVERRIDE REQUEST

### SECTION I. STUDENT AND PARENT INFORMATION

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
WVU ID

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Telephone Number

### SECTION II. EXCEPTIONAL CIRCUMSTANCES

Check all that apply. If none apply, skip this section and move on to Section III.

- Incarceration of parent:** *Attach a notarized statement from a guardian or other responsible adult.*
- Whereabouts of parent unknown:** *Attach a notarized statement from a guardian or other responsible adult.*
- Prior parent bankruptcy prohibits taking on additional debt:** *Attach a letter from the court verifying that the bankruptcy specifically prohibits the parent from taking on additional debt.*
- Family income is limited to public assistance and/or disability:** *Attach either a notarized statement, letter on DHHS letterhead, or a 1099 tax form.*
- Parent has a judgment lien for a debt owed to US:** *Attach a copy of notice of lien or notarized statement.*
- Parent is not a U.S. citizen or is unable to provide evidence that s/he is in the United States for other than a temporary purpose with the intention of becoming a citizen or permanent resident:** *Attach a notarized statement from parent.*

### SECTION III. DEBT TO INCOME RATIO (If you completed Section II, DO NOT complete this section.)

Complete every item listed below, even if it is a zero amount.

- |   |          |
|---|----------|
| ➤ <b>Monthly mortgage or rent:</b> <i>Attach copy of lease or mortgage statement</i>    | \$ _____ |
| ➤ <b>Minimum monthly credit card payments:</b> <i>Attach most recent statements</i>     | \$ _____ |
| ➤ <b>Monthly car loan payments:</b> <i>Attach monthly statements</i>                    | \$ _____ |
| ➤ <b>Other monthly loan payments:</b> <i>Attach monthly statements</i>                  | \$ _____ |
| ➤ <b>Annual gross salary:</b> <i>Attach most recent pay stub or other documentation</i> | \$ _____ |
| ➤ <b>Bonuses and overtime pay</b> (annual estimate)                                     | \$ _____ |
| ➤ <b>Alimony or child support received</b> (annual estimate)                            | \$ _____ |
| ➤ <b>Other income</b> (annual estimate, taxable and nontaxable)                         | \$ _____ |

***I certify that this information is true and accurate.***

\_\_\_\_\_  
Parent Signature *(Must be signed in ink. Electronic signatures not accepted.)*

\_\_\_\_\_  
Date

Student Name: \_\_\_\_\_

WVU ID: \_\_\_\_\_

**SECTION IV. REQUEST FOR ADDITIONAL FEDERAL UNSUBSIDIZED LOAN**

**Complete this section if you would like to be reviewed for additional loan funds.**

An additional Federal Direct Unsubsidized Loan may be available to students whose parents are unable to obtain a Federal Direct Parent PLUS Loan due to exceptional circumstances. Please see chart below for maximum annual limits.

<b>Grade Level</b>	<b>Maximum Additional Unsubsidized Direct Loan Limit *</b>
Freshman & Sophomore	\$4,000
Junior & Senior	\$5,000
PharmD 1 & 2	\$17,500

*\*The Federal Direct Unsubsidized Loan begins accumulating interest from the date of disbursement. Amount awarded is based on federal guidelines and determined by a financial aid administrator. Higher limits may be available to students pursuing a Doctorate of Pharmacy (PharmD). Contact the Health Sciences Center Financial Aid Office for more information.*

I request an additional Federal Direct Unsubsidized Loan in the amount of \$\_\_\_\_\_ (if left unanswered maximum amount will be assumed) to be processed for educational expenses. I understand the amount approved may be less than I request.

\_\_\_\_\_  
**Student Signature** (Must be signed in ink. Electronic signatures not accepted.)

\_\_\_\_\_  
**Date**

**Return to Your Campus:**

**MORGANTOWN CAMPUS**  
**HEALTH SCIENCES CENTER**  
**POTOMAC STATE COLLEGE OF WVU**  
**WVU INSTITUTE OF TECHNOLOGY**

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75 Arnold Street | Keyser, WV 26726  
410 Neville Street | Beckley, WV 25801

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psc-finaid@mail.wvu.edu      Fax: 304-788-6939  
tech-financial-aid@mail.wvu.edu      Fax: 304-254-0710

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