

REQUEST FOR REAFFIRMATION LETTER

OFFICE OF FINANCIAL AID
1000 GALVIN RD S
BELLEVUE, NE 68005



Name: _____

Date: _____

Student SSN#: _____

The National Student Loan Data System (NSLDS) indicates that you have received an overpayment of federal student aid funds. By submitting this form you authorize Bellevue University to initiate a request for reaffirmation letter on your behalf. Once we have received your completed request, we will provide your Direct Lending servicer with the necessary information to initiate the process. Please monitor your student email account and your "To Do List" for updates.

For more detailed information regarding your federal overpayment, please visit the National Student Loan Data System (NSLDS) for Students website at <http://www.nsls.ed.gov> or by calling 1-800-433-3243.

Your signature authorizes Bellevue University initiate this process release the information listed below and initiate the process on your behalf.

Student's signature: _____ Date: _____

SCHOOL CERTIFYING OFFICIAL

Please do not write below this line, thank you.

Reaffirmation Request Date: _____ Institution Name: Bellevue University OPEID: 00974300

Certifying Official (Name, Title, Phone): _____

Certifying Official's Signature: _____

Student Name: _____ Student SSN: _____

Student DOB: _____ Dependency Status: _____

OVERAWARD DETAILS

Reason for Overaward: _____ Amount of Overaward: _____

Loan amount: _____ Loan Period: _____

Loan type: _____ DL Loan Year: _____ Aid Year Reconciled Y/N: _____

Current outstanding aggregate subsidized loan balance: _____

Current outstanding aggregate unsubsidized loan balance: _____

Current amount of unsubsidized eligibility: _____