

7750 Montpelier Road Laurel, Maryland 20723 www.muih.edu 410-888-9048

## Financial Aid Office Overlapping Loan Clearance Letter

Student Name:	Date:	
Student ID:		
According to the National Student Loan Dacurrent Federal Direct Loan at another educative University of Integrative Health in complia form completed by a Financial Aid Adminifill in your social security number above, sauthorization, and forward to your last education to the Financial Aid Office of Mary 7750 Montpelier Rd, Laurel, MD 20723, of Integrative Health cannot take further action your prior educational institution has return release of this information:	cational institution. To nece with federal regularistrator at your previousign, and date below for cational institution with land University of Intervia fax 833-734-7365 on on your application in	process loans at Maryland ations, we need you to have this seducational institution. Please the release of information instructions to complete and grative Health, S. Maryland University of for a Federal Direct Loan until
Student's signature:	Date:	
School (	Certifying Official:	
Institution name:	Phone:	
Address:	Email:	
City:	State:	Zip code:
Student's (expected) last date of Attendance	e:	
Loan period:		
Loan amount received • Subsidized:	Unsubsidized:	
Loan amount cancelled • Subsidized:	Unsubsidized:	Date:
Name of certifying official (please print): _		_Title:
Signature:	Date:	