

Office of Financial Aid

School of Dentistry • 2700 Martin Luther King Jr. Blvd. • Detroit, MI 48208 Phone: 313-494-6617 Email: orlandan@udmercy.edu

Summer 2021 Application for Financial Aid

This application must be completed if you want to receive summer financial aid.

Summer financial aid will be limited to the cost of living component in your financial aid budget for the 11 weeks of the Summer semester. Students living with parents can borrow a maximum of \$ \$2,519*. Students not living with parents can borrow a maximum of \$6,842* (*amount before loan fee deducted.)

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 (Dental	Hygiene Only)	
Unsubsidized Stafford Loan		
☐ Grad PLUS Loan (This is a credit	based loan and by selecting it yo	ou are requesting a credit check)
Health Professions Loan (If funds available)		
	which amount you would I	
Maximum I am eligible to receive	We will contact you before prod	cessing if this will reduce your Fall 2021 loans)
Cther amount \$		
Alternative Loans: Alternative loans m	vith the lender selection proces	der of the student's choice. UDM has s. A new loan application must be completed
For this period of school, I will be living	ng:	_
☐ In house/apartment	☐ With family/relatives	
Program:		
☐ Dental	☐ Dental Hygiene	☐ Ortho/Endo/Perio
Will you be graduating this summer?		
☐ Yes	□No	
ident Name:	Student ID: T0	Date: