



Student Name: _____ **Student NUID:** _____

Phone Number: _____ **Birth Date:** _____

Overlapping Loan Release

Please Note: To determine your loan eligibility at Chadron State College, we are required to review your student aid history. As a result of our inquiry into the National Student Loan Database System, it appears that you are attending another institution while you are enrolled at Chadron State College. Therefore, we are unable to determine the funding received and/or confirm your withdrawal from the other institution. To ensure that you are awarded in compliance with Federal Regulations, we will need you to obtain the following information from your previous institution.

By signing below, I give authorization from my previous institution to release the information below:

Student Signature: _____ DATE: _____

To be completed by a Financial Aid Administrator at your previous institution

To be completed by Financial Aid Official:	
Loan Period: _____	Academic Year: 2025/26 or 2026/27
Gross Loan Amount(s) Disbursed (less refunds to lender):	
Subsidized: \$ _____	Unsubsidized: \$ _____
Pell Amount Disbursed: \$ _____	Official Last Date of Attendance: _____
Future Disbursements Cancelled: Yes or No <i>(circle one)</i>	Last Date of Loan Disbursement: _____
Institution Name: _____	Date: _____
Address: _____	
City: _____	State: _____ Zip: _____
Financial Aid Official Name: _____	Title: _____
Signature of Certifying Official: _____	
Phone: _____	Email: _____