Account Action Plan

LUC.edu/bursar | bursar@luc.edu |773.508.7705 | Sullivan Center 190

Submission of this form does not guarantee that your card will not be deactivated. The Office of the Bursar will notify you if/when your Action Plan has been accepted. Only those who resolve their balance or have an approved action plan will no longer be at risk for ID deactivation.

Student Name:	Loyola ID: 0000
Account Balance: (See Account Summary by Term in LOCUS)	As of:
All current students who have a past due be Plan detailing what actions they plan to take in action plan can result in ID card deactivation. I well as many services and facilities at Loyola. Pe deemed an acceptable action plan. An	·
Yes – Date submitted:	
No – Planned Completion Date:	
N/A	
2. Are all Financial Aid To-Do list items compl	ete?
Yes – Date completed:	
No – Planned Completion Date:	
N/A	
3. Have you applied for any additional federa	ol or private loans? (Please attach a copy of the approval/denial
Yes	
o Type of Loan:	
Loan Amount: Application Data:	
Application Date:	
	th the Financial Aid Office regarding your financial situation?
No	
5. Were you on an iPlan that has since been o	cancelled?
Yes – Cancellation Reason:	
No	

Intend to enroll in future term		
Have applied for graduation		
Neither (explain):		
7. Additional actions you plan on taking to resolve y	our balance (additional paper ma	ay be used):
Please attach any additional information regarding your statements of verified funds.	-	
8. Calculate your resolution:		
Current balance ("Balance for all Accounts" on Account	nt Summary By Term in LOCUS)	
Loans or other aid you currently have in process Anticipated Disbursal Date	Amount:	
Personal payments you have made Date received by OTB	Amount:	
Final Balance (must equal zero/paid in full) Account paid in full by	\$_	-0-
By signing below, you acknowledge your obligation to to your account (late fees, dorm damage fees, etc.). this signed form is only a petition to avoid ID card decision to do so will be at the discretion of Registration, official transcript, and diploma holds capayment has cleared.	You further acknowledge/unders deactivation or reinstate your II the Loyola University Chicago	tand that submission of D card access. The final Office of the Bursar.
Student Signature:	Date:	
Decisions and requests for further information will be		nail address.
To be completed by	Office of the Bursar staff	
Action Plan Approved? Reviewe Yes – Date: No – Reason:	·	

6. Which of the following applies to you?