

**UNIVERSITY OF ALASKA FAIRBANKS
FINANCIAL AID OFFICE
101 EIELSON BLDG
FAIRBANKS, AK 99775
(907) 474-7256 OR 1-888-474-7256
financialaid@uaf.edu**

LOAN REINSTATEMENT FORM

Name: _____

Student ID: _____ SSN _____

Please reinstate my (State, Federal, Alternative) loan funds for the
_____ semester in the amount of _____.

Student Signature: _____ Date: _____