

**2009-2010
FEDERAL DIRECT STAFFORD LOAN REQUEST FORM**



This form is a request for the Office of Financial Assistance to process a student loan. You must also complete the Direct Loan Master Promissory Note (this must be done the first year you apply for loans). Do not leave any items blank. All information is needed for loan certification.

Name: _____ Student ID# _____

Social Security Number: _____ Phone # _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Student Email Address: _____

Anticipated Graduation Date from Illinois Central College ____/____ (month/year)

Amount Requested: \$ _____

Your Subsidized Stafford Loan eligibility (if any) will be certified prior to Unsubsidized loan eligibility. If your loan amount requested exceeds your Subsidized loan eligibility, do you want an Unsubsidized loan certified?

YES NO (circle one)

Please indicate the semesters to be included in your loan period. All loans are disbursed in two payments during a loan period, including one semester loans. This is required by Federal Regulation.

___ Fall/Spring Semesters ___ Fall Semester Only ___ Spring Semester Only ___ Summer Semester Only

SITUATIONS THAT MAY DELAY OR CANCEL YOUR LOAN:

- **ENROLLMENT IN SECOND EIGHT-WEEK COURSES** may delay your loan until after these classes start.
- **CHANGE IN YOUR ENROLLMENT STATUS** may require a recalculation of your loan eligibility.
- **DROPPING BELOW SIX (6) CREDIT HOURS** will result in cancellation of undisbursed loan funds.
- **FILING FOR BANKRUPTCY** will cancel any pending loan disbursements.

If you have a Federal Work-Study (**FWS**) award, please check **one**: (applying for a loan may require cancellation of your FWS award)

- **Cancel or reduce** my FWS award and certify my loan for the remainder of my aid eligibility, up to the amount requested. (X) _____ (If you are currently working in a FWS job, please notify Financial Assist. Office.)
- **Do not Cancel** my FWS award. Please certify my loan for full aid eligibility up to the amount requested. (X) _____.

I Authorize Illinois Central College to process my Federal Direct Loan request. I understand that this loan constitutes a debt that will enter repayment upon the expiration of my grace period, six months after I graduate, withdraw, or otherwise drop below half-time enrollment.

Borrower's Signature: _____ Date: _____

FOR OFFICE USE ONLY

Rate of Attendance _____
Loan Period _____
Sub Amt _____
Unsub Amt _____