

UNDERGRADUATE
STAFFORD LOAN REQUEST WORKSHEET

STUDENT SECTION (TO BE COMPLETED BY STUDENT):

NAME: _____ **SS#** _____

LOAN PERIOD (2-TERM MAXIMUM):

STAFFORD LOAN AMOUNT REQUESTED FOR LOAN PERIOD:

SUB. STAFFORD LOAN : \$ _____

UNSUB. STAFFORD LOAN : \$ _____

STUDENT'S SIGNATURE: _____ **DATE:** _____

SCHOOL SECTION (TO BE COMPLETED BY SCHOOL):

GUARANTEED DATE: _____

1. ACADEMIC YEAR: _____

2. LOAN PERIOD (MONTH/DAY/YEAR) FROM: _____ **TO:** _____

3. GRADE LEVEL: _____

4. DEPENDENCY STATUS (CHECK ONE): [] **DEPENDANT** [] **INDEPENDENT**

5. ENROLLMENT STATUS (CHECK ONE): [] **FULL TIME** [] **HALF TIME**

6. ANTICIPATED COMPLETION (GRADUATION DATE MO/DAY/YEAR):

7. COST OF ATTENDANCE: \$ _____

8. FEDERAL EXPECTED FAMILY CONTRIBUTION (EFC): \$ _____

9. ESTIMATED FINANCIAL AID (EFA): \$ _____

10. CERTIFIED LOAN AMOUNTS: **A. SUB** \$ _____ **B. UNSUB** \$ _____

11. RECOMMENDED DISBURSEMENTS (MO/DAY/YR):

12. DATE PROCESSED: _____

13. PROCESSED BY (INITIALS): _____

