

**CHICAGO STATE UNIVERSITY
FEDERAL STAFFORD LOAN REQUEST FORM**

**Loan Period:
Fall 2008 / Spring 2009**

This Federal Stafford Loan Request Form may not be used by students enrolled in the College of Pharmacy.

Submit this signed and dated form to the Office of Student Financial Aid. All items must be completed.
Please allow 3-4 weeks for processing. Allow 4-6 weeks if submitted during August or September.
A faxed copy will be accepted at 773-995-3574. A scanned copy will be accepted by e-mail at csu-finaid@csu.edu

Name _____ SS# _____ Date-of-birth _____

The address, telephone number and driver's license number (if you have one) that is on file in the Office of Records and Registration will be used to complete the certification of loan eligibility that will be provided to your lender. If your address and/or telephone number and/or driver's license number is/are not up-to-date please contact the Office of Records and Registration (Room 128 of the Cook Administration Building) and update your information before submitting this form.

Number of hours you will register for: Fall Semester _____ Spring Semester _____

(Please Note: If you do not enter "hours" for the Spring Semester you will be processed for a Fall-Only loan.)

If you do not enter "hours" for either Semester you will be processed for a Fall-Only loan based upon half-time enrollment.)

Course of Study: Undergraduate Master's/Doctorate Certification/Certificate 2nd Bachelors

What is your anticipated graduation date? (month/year) _____

Requested loan amount: Subsidized Stafford \$ _____ or Maximum Eligibility
Unsubsidized Stafford \$ _____ or Maximum Eligibility

Dependent Students Note: If you request Unsubsidized Stafford you will be processed for an amount of up to \$2,000 (or the amount you requested, if less) if you have remaining need in your budget. If you would like to receive more than the \$2,000, and you have remaining need in your budget, you must first provide us with a denial from a lender of a Federal Parent PLUS Loan for the parent(s) whose information you included on your FAFSA.

To which lender should we submit this loan request? _____ Lender Code _____

(If you do not indicate a lender one will be chosen for you. See our Choosing a Lender web page for more information.)

Guarantee Agency preference: _____ (Fill this in only if you would like to use a guarantee agency other than the guarantee agency of choice for your chosen Preferred Lender or if you have chosen a lender other than one of the Preferred Lenders. If you have chosen a lender other than one of the Preferred Lenders, and do not indicate a guarantee agency preference, one will be chosen for you.)

All borrowers (both first-time and continuing) must complete a Debt Management Loan Counseling Session (a/k/a/ Entrance Interview) before his/her loan will be processed if they have not completed such a session since June 30, 2007 This session must be completed on-line. Go to the main CSU web site at www.csu.edu. Click on "Financial Aid" and then the "Loan Counseling" tab. Follow the instructions on the screen and complete "Federal Stafford Loan Entrance Counseling".

By completing this application, you are authorizing us to receive your loan proceeds electronically, and acknowledging that you have read, understand and agree to comply with the terms as set forth in the "2008-2009 FEDERAL STAFFORD LOAN FACT SHEET", which you may review and download from the Financial Aid section of the CSU web site. **Please Note: This FEDERAL STAFFORD LOAN REQUEST FORM will be removed from the web site after October 15, 2008.**

Signature VOID VOID VOID VOID **Date** _____

===== **DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY** =====

Grade _____ FT HT (# Hours _____) Grad. Date _____ SAP Reviewed? Yes No

Approved: Subsidized \$ _____ Disb. Dates: Standard
Unsubsidized \$ _____ 1st Time Borrower (30 day delay)

Budget _____ EFC _____ Aid _____ FAA _____ Date _____

VOID