

STUDENT INFORMATION:

Last Name	First Name	Middle Initial	Student ID #
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1. REQUIRED STEPS TO REQUEST A LOAN:

- Complete all the steps listed on schoolcraft.edu/aid/loans, including Entrance Loan Counseling and Master Promissory Note (MPN) at studentaid.gov under “Complete Aid Process”.
- This request will be voided if anything is left blank or all steps are not complete.

2. FALL/WINTER LOAN AMOUNT REQUESTED? \$ _____ .00

This amount is not guaranteed. Enrollment and other aid awarded may affect your eligibility.

The amounts will be split evenly between Fall and Winter semesters

All loans are subject to an origination fee of 1.057% (for 2021-2022), or around \$11 per \$1000 awarded

Check this box if you do not want a Winter loan – your amount requested will be considered for Fall only.
Please note: Fall only loans are subject to two disbursements so your refund will be delayed.

Check this box (and circle one) if you will be registered for
EMT, FIRE, POLICE ACADEMY, CULINARY BAKING, or PASTRY

Course Number (Fall) _____ Course Number (Winter) _____

To check your current student loan total, login to studentaid.gov

	Dependent	Independent
	ANNUAL LOAN LIMITS	
Freshman <i>(0-25 credits)</i>	\$5,500 (\$2750 per semester)	\$9,500 (\$4750 per semester)
Sophomore <i>(26+ credits)</i>	\$6,500 (\$3250 per semester)	\$10,500 (\$5250 per semester)
	LIFETIME LOAN LIMITS	
	\$31,000	\$57,500

3. BY SIGNING THIS REQUEST I AGREE THAT TO RECEIVE A STUDENT LOAN:

- I must enroll and attend at least **6 credit hours** in each semester
- I acknowledge the college will receive this loan in two separate disbursements.
- I read and understand the information on schoolcraft.edu/aid/loans
- I understand this form, the obligations and terms of borrowing from this loan program.
- I Authorize the college to charge my financial aid for tuition/fees/books/supplies
- I Am responsible to pay any balance should my financial aid be reduced/denied.
- I understand that I can only receive aid from one school per semester.

Please allow 1-2 weeks for processing

Student Signature _____

Date _____

Phone Number _____