

University of Massachusetts Medical School 2016-2017

FEDERAL DIRECT STAFFORD LOAN REQUEST/CHANGE FORM

Last Name:	First Name:	Middle Initial:
Local Address:		
City:	State:	Zip code:
Date of Birth:	Type of Student: (Circle ONE)	GSN SOM GSBS
SSN#:	Phone:	

LOAN AMOUNT REQUESTED (Please make only ONE selection below):

I wish to borrow **LESS than the maximum** amount of Federal Direct Stafford Loan for which I am eligible.

\$ _____ * (specify the **GROSS** loan amount you are requesting)

The US Department of Education charges a loan origination fee of 1.068% (on loans originated between 10/1/15-10/1/16). This fee will **automatically be deducted** from the loan amount requested at the time of disbursement. You may request that the Office of Financial Aid calculate this fee, and add it into the **GROSS** loan amount that you are requesting above.

I authorize the Office of Financial Aid to calculate and add in the origination fee on the **GROSS** loan amount requested above.*

Student Signature

Date

I wish to **borrow the maximum** amount of Federal Direct Stafford Loan for which I am eligible, as determined by the Office of Financial Aid. The US Department of Education charges a loan origination fee of 1.068% (on loans originated between 10/1/15-10/1/16). This fee will **automatically be deducted** from the loan amount requested at the time of disbursement.

Student Signature

Date

DISBURSEMENTS:

Federal Stafford loans will be divided in **two equal disbursements for the fall and spring semesters**, unless the applicant requests otherwise. If you would like to request an alternate disbursement schedule, please indicate below:

\$ _____ Fall 2016 \$ _____ Spring 2017 \$ _____ Summer 2017

All requests for an alternate disbursement schedule must be reviewed and approved by the Office of Financial Aid. Applicants will be contacted, in writing, within 5-10 business days with a determination.

NOTE: Incomplete and illegible forms will be returned unprocessed to the applicant.

CERTIFICATIONS: I certify that ALL of the information on this form is complete and accurate to the best of my knowledge. I am aware this is only an application for a loan. I must sign and complete a Master Promissory note at www.studentloans.gov and complete online entrance counseling.

Student Signature

Date