Office of Financial Aid and Veterans Affairs
5100 Black Horse Pike
Mays Landing, NJ 08330

Federal Direct Loan Request Form

*You must file a Free Application for Federal Student Aid (FAFSA) and receive a valid Student Aid Report (SAR) before completing this application.

1. The Direct Loan is a loan and must be repaid.
2. You must be enrolled for at least 6 credits per term throughout the entire loan period.
3. You must comply with ACCC's Standards of Academic Progress.
4. *First-time borrowers* must complete an on-line Entrance Counseling Quiz (see step 2).
5. You are required to electronically complete and sign your Master Promissory Note (MPN) at www.dlenote.ed.gov/ (see step 3).
6. ACCC may decrease or terminate loan eligibility due to excessive borrowing at another institution.
7. You can not be in default or overpayment of any federal grant/loan programs.
8. There is a 30-day delayed disbursement period for all first-time borrowers at ACCC.

Student's Last Name	Student's First Name	MI

College Wide ID Number: _____

Requested Amount: $___,____.00

Loan Period: (select one)

1	Fall/Spring	[Request is for full academic year]
2	Fall only	[Student must be graduating the end of the fall semester]
3	Spring only	[Student was not here in the fall or is graduating in spring]
4	Summer only	[Student is requesting loan for summer semester]

Expected credits of enrollment:

Fall [Year] _____ **Spring [Year]** _____ **Summer [Year]** _____

*Your loan will be processed as either subsidized or unsubsidized depending upon your financial aid eligibility. ACCC will always consider you for subsidized loan funds first. If you are not eligible for subsidized funds and are still in need of Direct Loan funding would you be willing to accept any or your entire loan in unsubsidized funds? Please check yes or no below and initial.

_ Yes I would be willing to accept unsubsidized funds and understand that I am responsible for the interest on these funds. _____

_ No I would not be willing to accept unsubsidized funds and understand that this decision may leave me with a balance that is my responsibility to fund. _____

By signing below, I understand that I am authorizing the Financial Aid Office at ACCC to provide the Direct Lending Servicer with any Information that is necessary for the electronic transfer of my Direct Loan funds.

Student Signature_____ Date: _____

Office Use Only:

Budget	Housing	EFC	Aid	Credits	Dep	Level	Culn	Denied