# 2015-2016 Direct Loan Request Form

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First</th>
<th>MI</th>
<th>Student ID Number</th>
<th>Date of Birth</th>
<th>Telephone #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Units Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

## Statement of Understanding

(Please initial all applicable items. If any item does not apply, enter N/A)

- [ ] I acknowledge that I have completed the 2015-2016 Free Application for Federal Student Aid (FAFSA) at [www.fafsa.ed.gov](http://www.fafsa.ed.gov).

- [ ] I acknowledge that I have completed my Financial Aid file by submitting all requested documents, as indicated on my Missing Information Checklist on WebAdvisor.

- [ ] (New borrowers* only) I have completed the Direct Loan Entrance Counseling for Undergraduate Students at [www.studentloans.gov](http://www.studentloans.gov).

- [ ] (New borrowers* only) I have completed the Direct Loan Master Promissory Note at [www.studentloans.gov](http://www.studentloans.gov).

- [ ] (New borrowers* only) I have attended a loan workshop.

- [ ] I acknowledge that I am meeting Satisfactory Academic Progress as defined by Los Medanos College or that I have submitted an appeal and that my appeal has been approved.

- [ ] I acknowledge that I will be enrolled in at least six (6) degree applicable units for each semester in which I am applying for a loan and that Los Medanos College will not disburse loan funds if I drop below 6 units at any time during the loan period.

- [ ] I acknowledge that I am enrolled in an eligible degree or certificate program.

- [ ] I understand that unless I take action to request a decrease or cancellation of the loan amount, all loans will be processed as shown on my student account on WebAdvisor.

- [ ] I understand that student loan funds are only to be used for educational expenses.

- [ ] I understand that if I do not meet criteria for the requested loan amount that the Office of Financial Aid will adjust the amount accordingly.

*New borrower is a student who has never borrowed loans at LMC or other college.*
2015-2016 Direct Loan Request Form

1. What is the loan amount requested?
<table>
<thead>
<tr>
<th>Subsidized: $</th>
<th>Unsubsidized: $</th>
<th>Total: $</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

   Loan Limits** (Amounts given are per Semester. For two semesters, double the amounts listed below.)

<table>
<thead>
<tr>
<th>Year</th>
<th>Independent Student</th>
<th>Dependent Student</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Max Subsidized</td>
<td>Max Unsubsidized</td>
</tr>
<tr>
<td>1st Year (less than</td>
<td>$1,750</td>
<td>$3,000</td>
</tr>
<tr>
<td>30 units)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2nd Year (30 units or</td>
<td>$2,250</td>
<td>$3,000</td>
</tr>
<tr>
<td>more)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   **If the student does not meet criteria for their requested loan amount, the Office of Financial Aid will adjust the loan amount accordingly.

2. Only one application per academic year will be considered. Be sure to choose a loan period to cover ALL semesters that you plan to attend this academic year. Check only ONE box.

3. Have you borrowed under the FFELP/Direct Loan program at a previous college? ___________ Outstanding balance: ___________

4. Are you (or have you been) delinquent or in default on any previous student loans? __________________________

5. Budget Exercise:
   Estimated Expenses by Current Year (12 months)   Estimated Resources by Current Year (12 months)
   Books/Supplies $_________________________   Money from Savings $_________________________
   Rent/Housing $_________________________    Money from Parents $_________________________
   Food $_________________________    Public Benefits $_________________________
   (CalWorks, SSI, etc.)
   Phone/Utilities $_________________________    Student’s Wages $_________________________
   Laundry $_________________________    Spouse’s Wages $_________________________
   Gas/Bus/Train $_________________________    Scholarships $_________________________
   Auto Insurance $_________________________    Financial Assistance $_________________________
   (Grants, Federal Work-Study, Loans)
   Medical/Dental $_________________________    CARE/EOP&S $_________________________
   Childcare $_________________________    Child Support $_________________________
   Other Expenses $_________________________    Other Resources $_________________________
   (Please list “Other Expenses” on separate sheet) (Please list “Other Resources” on separate sheet)

   Total Expenses $_________________________   Total Resources $_________________________

   Borrower’s Signature ___________________________ Date __________________

For Office Use Only
☐ Completed Entrance Interview   ☐ Completed MPN & Date ____________   Certified on Date ____________
Previous term SAP Status & Calc Date: ____________________________
COA ___________ EFC ___________ FA Awards ___________ Unmet Need ___________ Grade Level ___________ Checked NSLDS ___________
Loan Period: FA15 SP16 SU16 FA15 & SP16 SP16 & SU16
Loan Amount Requested: ____________ ☑ Approved ☐ Denied
FA Coordinator’s Signature ___________________________ Date: ____________