



JOHN CABOT UNIVERSITY

Request for Federal Direct Student Loan Form

Student's Last Name	Student's First Name	Middle Name
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Date of Birth	Social Security Number	JCU Student ID
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Address:	Address corrections, if any:
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Email Address

Home Phone	Cell Phone
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Drivers License #	State
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You must understand the following before you complete this application.

The Direct Loan is a loan and must be repaid.

You must be enrolled for at least 6 credits per term throughout the loan period.

First-time borrowers must complete an online counseling quiz.

John Cabot University may decrease or terminate loan eligibility due to excessive borrowing at another institution.

You cannot be in default or overpayment of any federal grant/loan programs.

Requested Stafford Amount	\$ _____, _____ .00
Requested PLUS Amount	\$ _____, _____ .00

Loan Period: Select only one.

- | | | |
|---|-------------|-------------------------------------|
| 1 | Fall/Spring | [Request is for full academic year] |
| 2 | Fall only | |
| 3 | Spring only | |

Your Loan will be processed as either a subsidized or unsubsidized depending upon your financial aid eligibility. John Cabot University will always consider you for subsidized loan funds first. If you are ineligible for subsidized funds and are still in need of Direct Loan funding, would you be willing to accept any or all your entire loan in unsubsidized funds? Please check yes or no below.

Yes No

By signing below, I understand that I am authorizing the Financial Aid Office at John Cabot University to provide the Direct Lending Servicer with any information that is necessary for the electronic transfer of my direct loan funds.

Student Signature	Date
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