



Financial Aid Department

NAME _____ SOCIAL SECURITY NO. _____

PERMANENT STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____ DRIVER'S LICENSE # / STATE _____

ENTRANCE COUNSELING

I promise to pay to the order of the lender all sums disbursed (hereafter "loan" or "loans") under the terms of the Master Promissory Note (hereafter "Note"), plus interest and other charges and fees that may become due to me under the Master Promissory Note. I understand that I may receive multiple loans under a single Note and that by accepting any disbursements issued at any time under the Note, I accept the obligation to repay the loans.

I must repay my loan(s), including all accrued interest and deducted fees, even if I do not complete my education, am unable to find employment, or am not satisfied with the education or other services I received. Repayment will begin as follows:

- **Subsidized Federal Stafford** - day after expiration of 6-month grace period
- **Unsubsidized Federal Stafford** - day after expiration of 6-month grace period

Borrower may make interest payments during school and grace periods.

The minimum monthly payment may be low as \$50, but can be more depending on repayment plan and/or amount borrowed. Repayment options available, with minimum 10 years to repay, unless noted:

- **Standard/Fixed** - set monthly payment
- **Graduated** - payment increases incrementally over time
- **Income-Sensitive** - based on income and evaluated annually
- **Extended** - new borrowers after 10/7/98 using a standard/fixed or graduated repayment with FFEL debt exceeding \$30,000 at time of repayment. Maximum 25 years to repay.
- **Consolidation** - extends repayment period and lowers monthly payment; however, the interest rate and total interest paid may be greater.

If I qualify, I may be eligible to temporarily defer or forbear (postpone) my loan payments or obtain a full or partial discharge of my loan(s). To be eligible, I must meet one of the following criteria:

- **To Defer:** I must be in school at least half-time, enrolled in a Graduate Fellowship Program or Rehabilitation Training Program, unemployed and actively seeking employment; or experiencing economic hardship.
- **To Forbear** (borrower responsible for interest accruing): I must be experiencing financial difficulties; be enrolled in an Internship or Residency Program; be working for a National Service such as AmeriCorps; have a loan pending forgiveness in a qualified area; be affected by a Local or National Emergency; be subject to Military Mobilization; or live in a designated disaster area.
- **To Discharge:** My loan(s) may be discharged due to Death, Total & Permanent Disability, or through the Teacher or Child Care Provider Forgiveness program or being a victim of the crime of identity theft.

It is my responsibility to notify my lender or current holder of my loan within 10 days if I:

- Change my name, address, or telephone number
- Drop below half-time status, withdraw, or transfer to another school
- Change my graduation date

If I fail to repay my student loan(s), I will be considered in default. The following negative consequences may result:

- My default will be reported to a national credit card bureau and will have a negative effect on my credit rating.
- The entire unpaid amount of my loan(s), including interest, will become immediately due and payable.
- My wages may be garnished.
- My federal and state income tax refunds may be withheld as well as any other federal payments due me.
- I may be ineligible to receive any additional federal and state financial aid funds.
- I may be sued to force payment and may be liable for court and attorney fees if judgment is not in my favor.

Expected graduation date: _____

I have received a copy of my entrance interview and understand the information on this form.

STUDENT SIGNATURE

DATE

COUNSELOR SIGNATURE

DATE

EXIT COUNSELING

Expected Permanent Address _____
City/State/Zip _____
Phone _____

Expected Employer _____
Address _____
City/State/Zip _____
Phone _____

Nearest Relative (not living with you) _____
Address _____
City/State/Zip _____
Phone _____

Reference Name _____
Address _____
City/State/Zip _____
Relationship _____
Phone _____

Reference Name _____
Address _____
City/State/Zip _____
Relationship _____
Phone _____

I have received a copy of my exit interview and understand the information on this form.

STUDENT SIGNATURE

DATE

COUNSELOR SIGNATURE

DATE

If student needs further assistance, contact the National Student Loan Data Systems at 1-800-4FED-AID or www.nslds.ed.gov. Additional assistance is also available from the Office of Student Financial Assistance Ombudsman's Office at 1-877-557-2575.