

**FEDERAL STAFFORD LOAN REQUEST FORM**

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_  
Last First Middle

Home Telephone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**This form is required for students requesting certification of a Federal Stafford loan. Complete all requested information, sign, and return to vjg@hcc.ns.ca**

**STEP 1:** Select loan period. Requested amounts MUST be divided into two equal payments for each certification.

FALL/SPRING \_\_\_\_\_ SPRING ONLY \_\_\_\_\_ SPRING/SUMMER \_\_\_\_\_ SUMMER ONLY \_\_\_\_\_

**STEP 2:** You may choose to apply for the full amount for which you are eligible based on your dependency status and grade level or a lesser amount. Please indicate your preference below.

**LOAN LIMITS for the academic year**

**1<sup>st</sup> year (32 or less credit hours) students: \$3500 Subsidized**  
**2<sup>nd</sup> year (33 or more credit hours) students: \$4500 Subsidized**

**Dependent students may borrow an additional \$2000 Unsubsidized if eligible**  
**Independent students may borrow an additional \$6000 Unsubsidized funds if eligible**

**Choose (A) or (B), do not fill in both.**

(A) Please certify my loan for the maximum amount I am eligible to receive from the subsidized and unsubsidized loan programs for the academic year.  
Initial here: \_\_\_\_\_

**OR**

(B) I am requesting a lesser amount of \$ \_\_\_\_\_ Subsidized \_\_\_\_\_ Unsubsidized \_\_\_\_\_

**STEP 3: Monthly Budget Calculator**

Enter dollar amounts in the calculator.

Income by month	Expenses by month
Monthly take home earnings (for you and your spouse) \$ _____	Rent/Mortgage \$ _____
All other monthly resources \$ _____	Utilities \$ _____
	Home/Cell Phone \$ _____
	Food \$ _____
	Child care \$ _____
	Transportation (car payment/ins/gas/bus tickets) \$ _____
	Monthly debt payments (credit cards, etc.) \$ _____
	Other personal expenses (please specify) \$ _____
<b>Total monthly income</b> \$ _____	<b>Total monthly expenses</b> \$ _____

**Results**

Subtract monthly expenses from monthly income: \$ \_\_\_\_\_

My signature on this form....

- Provides HCC authorization to apply loan funds to my account to pay for current year charges.
- Acknowledges that I have read, understand and agree to the terms and conditions outlined on HCC's home page at [www.halifaxcc.edu/finaid/](http://www.halifaxcc.edu/finaid/) regarding the receipt of and required repayment of these funds, the Satisfactory Academic Progress policy and other applicable policies.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_