



*Hannibal-LaGrange University*

## 2018-2019 Loan Request Form

This form is to be completed by the student to request Federal Direct Loans.

**Student Information:** (Please Print)

1. Student's Name \_\_\_\_\_
2. Student's ID Number \_\_\_\_\_
3. Student Borrower email address: \_\_\_\_\_
4. Federal Direct Loan Period:  
\_\_\_ Academic Year: August 2018 to May 2019  
\_\_\_ Fall Semester Only: August 2018 to December 2018  
\_\_\_ Spring Semester Only: January 2018 to May 2019  
\_\_\_ Summer Session only
5. Requested Subsidized Direct Loan Amount: \$ \_\_\_\_\_  
(If you are declining the entire loan this will be zero)
6. Requested Unsubsidized Direct Loan Amount: \$ \_\_\_\_\_  
(If you are declining the entire loan this will be zero)

**Borrower Certification:** I certify that the information provided on this form is true and correct.

I also certify that I understand that in order for my Federal Direct Loan to be disbursed I must complete and return this form to the Hannibal-LaGrange University Financial Aid Office, as well as have completed both Loan Entrance Counseling and the Master Promissory Note (MPN) at [www.studentloans.gov](http://www.studentloans.gov). By signing this Loan Form, I give my consent to Hannibal-LaGrange University to request my Federal Direct Loan for the amounts and loan periods indicated above.

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**Borrower's Signature**

**Date**

**HLGU Financial Aid**

2800 Palmyra Rd. | Hannibal, MO 63401 | Ph: 573.629.3279 | fax: 573.248.0954 | [financialaid@hlg.edu](mailto:financialaid@hlg.edu)