

# US Direct Loan Application

PERSONAL INFORMATION: PLEASE PRINT			
<i>Last Name</i>	<i>First Name</i>	<i>SSN</i>	<i>Concordia Student ID#</i>
<i>Email</i>	<i>Phone Number (s) with area codes</i>		<i>Date of Birth (mm/dd/yyyy)</i>
<i>Canadian Address</i>	<i>City</i>	<i>Province</i>	<i>Postal Code</i>
<i>United States Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

Student Status (Please check all relevant boxes)	
<i>American Citizen</i>	<i>I am a Veteran of the US Armed Forces</i>
<i>Eligible American Non-Citizen</i>	<i>I am on active duty with the US Armed Forces</i>
<i>Canadian Citizen with Canadian Funding</i> <i>Province:</i>	<i>I am requesting a letter of anticipated aid for my CAQ/Student Visa Application. Visa submission deadline:</i>
<i>Dual Citizen</i>	<i>I am applying for Federal Student Aid for the first time</i>
<i>Other:</i>	<i>I have had US loans or grants in the past</i>

<i>Student Signature</i>	<i>(mm/dd/yyyy)</i>
--------------------------	---------------------

## APPLICATION DEADLINES FOR THE 2015-2016 AID YEAR

**SUMMER 2015: April 7, 2015**  
**FALL 2015/WINTER 2016: June 15, 2015**  
**WINTER 2016 (ONLY): November 16, 2015**

<p><b>OFFICE USE ONLY:</b></p> <p> <input type="checkbox"/> VISA                       <input type="checkbox"/> VISA Paying QC fees                       <input type="checkbox"/> Canadian                       <input type="checkbox"/> Québec Rate                       <input type="checkbox"/> Receives QC/Out of Province Funding                 </p> <p>Notes: _____</p> <p>_____</p>
---

# ESTIMATED FINANCIAL ASSISTANCE (EFA) DISCLOSURE FORM (Undergraduate Students)

**Last Name**
**First Name**

In support of your application for U.S. Federal Student Aid, you are requested to advise the Financial Aid & Awards Office of any and all income/financial assistance (anticipated or actual), that you will be receiving during the academic year. If additional financial assistance is received after the Direct Loan funds are disbursed, it is your responsibility to provide Financial Aid & Awards Office with the updated information as soon as possible.

DETAILS OF STUDIES	CONFIRMATION OF STUDIES
Undergraduate Year of	Summer Credits
Faculty	Fall Credits
Major	Winter Credits
Anticipated Completion Date:	

Financial Information		Loan History (can be obtained by logging onto <a href="http://www.NSLDS.ed.gov">www.NSLDS.ed.gov</a> ):	
Type:	Amount (CND)	Type:	Aggregate Total (USD)
Scholarships	\$	Subsidized	\$
Bursaries	\$	Unsubsidized	\$
Canadian Student Loans	\$		\$
Other US Loans/Grants	\$		\$
Specify (ex. VSAC, Sallie Mae)			\$

REQUESTED LOAN AMOUNT	
I want to receive Subsidized and Unsubsidized Direct Loans	I want to receive Parent PLUS Loans (Please complete page 5 of this document)
I want to receive only Subsidized Direct loans	I want to receive Private Funding
I want to receive only Unsubsidized Direct Loans	
I want to limit my loan to \$ _____ (USD)	

Student Signature	(mm/dd/yyyy)
-------------------	--------------

**OFFICE USE ONLY:**

Notes: \_\_\_\_\_

\_\_\_\_\_

# ESTIMATED FINANCIAL ASSISTANCE (EFA) DISCLOSURE FORM (Graduate Students)

**Last Name**
**First Name**

In support of your application for U.S. Federal Student Aid, you are requested to advise the Financial Aid & Awards Office of any and all income/financial assistance (anticipated or actual), that you will be receiving during the academic year. If additional financial assistance is received after the Direct Loan funds are disbursed, it is your responsibility to provide the FAAO with the updated information as soon as possible.

DETAILS OF STUDIES	CONFIRMATION OF STUDIES	
Graduate Year of	Summer	Credits
Faculty	Fall	Credits
Major	Winter	Credits
Anticipated Completion Date:		

Please complete the following:		
Graduate Assistantship:	Fall/Winter \$	Summer: \$
Research Assistantship:	Fall/Winter \$	Summer: \$
Teaching Assistantship:	Fall/Winter \$	Summer: \$
Tuition Waiver:	Fall/Winter \$	Summer \$
Internal Awards/Scholarships:	Fall/Winter \$	Summer \$
External Awards/Scholarships:	Fall/Winter \$	Summer \$

REQUESTED LOAN AMOUNT	
I want to receive only Unsubsidized Direct	I want to receive Graduate PLUS Loans
I want to receive Private Funding	I want to limit my loan to \$ .....(USD)

<i>Student Signature</i>	<i>(mm/dd/yyyy)</i>
--------------------------	---------------------

**OFFICE USE ONLY:**

Notes: \_\_\_\_\_

\_\_\_\_\_

# Signature & Declaration Page

I, \_\_\_\_\_ (please print) certify that all the above information, and the information provided to the United States Department of Education, is true and accurate to the best of my knowledge. I agree to notify Concordia University and the United States Department of Education of any changes, at any time, which may impact my eligibility as a borrower or which may impact the amount I am able to borrow. I grant permission to Concordia University and the United States department of Education to communicate any and all information provided on my student loan applications or affiliated documents, emails, facsimiles', or telephone calls and to use this information in the administration of the loan including application and compliance. I assert that I have read the rules and regulations for all relevant funding and understand my risks and responsibilities as a student and as a borrower.

<i>Student Signature</i>	<i>(mm/dd/yyyy)</i>
--------------------------	---------------------

I, \_\_\_\_\_ (please print) understand that I must inform my US Loan Advisor at Concordia University of any changes in my circumstances, including but not limited to changes in enrollment, student status, awards, academic probation, living arrangements, contact information, etcetera. I understand that failure to advise can result in the discontinuation of loan funding or the proration of interest. I acknowledge that it is my responsibility as a borrower to provide accurate and updated information to Concordia University and to the US Department of education throughout the loan period and I exonerate the aforementioned parties from any harm or damages incurred by inaccurate, missing or expired information.

<i>Student Signature</i>	<i>(mm/dd/yyyy)</i>
--------------------------	---------------------

I, \_\_\_\_\_ (please print) understand that my tuition and fees will be automatically deducted from my financial aid as per Concordia University policy. I understand that if the loan amount exceeds the balance due on my Student Account, that Concordia University will **automatically** issue me a refund cheque balance within ten (10) business days of my disbursement. The Financial Aid Office will notify me once the cheque is available for pick-up. I understand that in no case will Concordia University hold a credit balance of loan funds on my Student Accounts beyond 21 calendar days; after which time Concordia University will mail the cheque to the address on my portal.

<i>Student Signature</i>	<i>(mm/dd/yyyy)</i>
--------------------------	---------------------

I, \_\_\_\_\_ (please print) comprehend that under U.S. Legislation, Concordia University is a Foreign School. Accordingly, in compliance with 34 CFR §600.51, 600.52, 600.54 et seq., the following programs are ineligible for Title IV funding under the Direct Loan Program: programs offered in whole or in part through telecommunications, otherwise known as distance education; programs in whole or in part through correspondence; programs offered in whole or in part through direct assessment; programs for which any portion of the program is provided by an entity that is not eligible to participate in the FSA Programs (internships and externships), and with limited exception; programs offered in whole or in part in the United States. By signing my name below, I acknowledge that enrollment in any of the above listed programs or courses will immediately disqualify me for Title IV funding and may result in the immediate repayment of all Title IV funds to the US Department of Education.

<i>Student Signature</i>	<i>(mm/dd/yyyy)</i>
--------------------------	---------------------

# Parent PLUS Loan – Funds Release Form

Under the US Federal Direct Loan Program, when you apply for a Parent PLUS Loan, funds will be sent directly to Concordia University via wire transfer. Given that the loan is issued in your name, Concordia University must obtain your written permission to release excess funds to your dependent to cover living expenses.

By signing below, you authorize Concordia University to issue a refund cheque directly to your dependent should a credit balance result after tuition and fees are paid.

<i>Parent First Name:</i> _____	<i>Parent Last Name:</i> _____
<i>Dependent First Name:</i> _____	<i>Dependent Last Name:</i> _____
<i>Dependent's Concordia Student ID#</i> _____	<i>Parents email address (printed):</i> _____
<i>Parent Signature:</i> _____	<i>Date signed (mm/dd/yyyy):</i> _____

**NOTE: Without your authorization, funds received by the University will be converted into a refund cheque (issued in US dollars) which will be in your name and mailed to your permanent home address. As a result, your dependent will not have access to these funds.**

**You must submit this form  
by mail**

**Faxed, scanned or emailed documentation is not accepted**

**Mail your documents to  
The Financial Aid & Awards Office/Concordia University  
1455 de Maisonneuve Blvd., W. GM 230.00,  
Montreal, Quebec. H3G 1M8**

**Or bring your documents to**

**The Financial Aid & Awards Office / Concordia University  
1550 de Maisonneuve Blvd., W. GM 230.00,  
Montreal, Quebec. H3G 1N2**

The Financial Aid & Awards Office

1455 de Maisonneuve Boul. West, GM 230.00, Montréal, Québec, Canada H3G1M8  
Tel: (514)848-2424 ext 3507 Fax: (514)848-3508 <http://faao.concordia.ca> email: [help@faao.concordia.ca](mailto:help@faao.concordia.ca)

## PROXY AUTHORIZATION FORM FINANCIAL AID & AWARDS OFFICE

**STUDENT'S IDENTIFICATION** Please Print

<b>Surname</b>	<b>Given Names</b>
<b>Student ID# no.</b>	<b>Student P/C/S.I.N./S.S.N:</b>

**Academic Year:** \_\_\_\_\_ **(This document is only valid during the indicated Academic Year)**

**THE BEARER OF THIS FORM (Name of Proxy)** Please Print

<b>Surname</b>	<b>Given Names</b>
_____	_____

**IS HEREBY AUTHORIZED TO** (Check the appropriate box below)

Make Inquiries Into my Financial Aid & Awards File

Pick up my LOAN CERTIFICATE

Pick up my BURSARY/GRANT CHEQUE(S)

Pick up my SCHOLARSHIP CHEQUE

OTHER (Please Specify): \_\_\_\_\_

**DECLARATION AND SIGNATURE**

_____	_____
Student's Signature	Date (dd/mm/yyyy)
_____	_____
Proxy's Signature	Date (dd/mm/yyyy)

**PHOTO IDENTIFICATION FOR BOTH THE STUDENT AND THE PROXY ARE REQUIRED**

***Students have the right to cancel their Proxy Authorization at any time.  
To cancel, please contact the Financial Aid & Awards Office 514-848-2424 ext. 3507***



# Direct Loan Checklist

---

## You will need the following information to complete your application

- Your FSA User ID and Password
- Your Social Security Number
- Your Date of Birth
- Your Driver's License Number (if applicable)
- Two Personal References (Full name, address and telephone numbers)
- A completed Proxy Authorization Form (if applicable)

## Applying for Direct Loan Funding

- Apply for Federal Student Aid (Direct Loan) using FAFSA Review & Print Student Aid Report (SAR)
- Complete & Print an Entrance Counselling Session at [www.studentloans.gov](http://www.studentloans.gov)
- Complete & Print a Direct Loan Master Promissory Note (MPN) at [www.studentloans.gov](http://www.studentloans.gov)
- Download and complete Concordia University US Loan Application
- Download and complete the Parent Plus Fund Release Form & PLUS Counselling (if applicable)
- Submit the above listed loan documents to the Financial Aid & Awards Office upon completion.

## Preparing for Disbursement of Direct Loan Funds

- Once the FAAO has notified you via email of your loan amount, you must formally accept the loan award(s) being offered by responding to the email.
- Must be enrolled at least half-time at the time of disbursement (6 credits)
- Cannot be enrolled in any distance education or online courses
- Must meet **all Satisfactory Academic Progress** requirements. (Last Annual Grade Point Average [GPA] of a minimum 2.0)

I, \_\_\_\_\_ (please print) understand that by signing my name below I irrevocably authorize the Financial Aid & Awards Office at Concordia University to withdraw money (ies) from my Student Account if the United States Department of Education requires that Concordia University return Title IV (4) Funds (US Federal Direct Loan Funds), which occur if I withdraw from my studies at Concordia University. Furthermore, if the return of Title IV (4) Funds results in an outstanding balance on my student account, I will pay the outstanding balance immediately. I agree that the failure to pay any outstanding balance may result in the loss of university privileges and services, as outlined by Concordia University regarding unpaid fees.

Student Signature

(mm/dd/yyyy)

The Financial Aid & Awards Office

1455 de Maisonneuve Boul. West, GM 230.00, Montréal, Québec, Canada H3G1M8  
Tel: (514)848-2424 ext 3507 Fax: (514)848-3508 <http://faao.concordia.ca> email: [help@faao.concordia.ca](mailto:help@faao.concordia.ca)