

(For office use only)
Date received
MPN
Counseling
FAFSA

2023-2024

FEDERAL STAFFORD LOAN APPLICATION

1725 Bear Valley Parkway, Escondido, CA 92027-4128 phone: 760.480.8474 or 1.888.480.8474 fax: 760.480.0252 www.wscal.edu

DIRECTIONS

- Complete the Free Application for Federal Student Aid (FAFSA) at www.fafsa.ed.gov
- First time borrowers at Westminster must complete entrance counseling and may need to sign a Stafford Loan MPN if they do not have an active MPN. Both can be done at www.studentaid.gov
- Complete this form (Westminster Seminary California Application for Federal Stafford Loans)
- You must reapply *each academic year* that you want to take out a loan. The Financial Aid Coordinator will not begin to certify your loan until you are enrolled and all forms are submitted.
- Typically, students request one loan for the entire academic year, which is then divided into two portions (one half for the fall semester and one half for the spring semester).
- Federal loans are offered only to students who are enrolled at Westminster Seminary half-time (defined as 6 units per semester) or more.
- For additional information please visit our website, <u>www.wscal.edu</u>, or see the Financial Aid section of the academic catalogue.

PERSONAL INFORMATION (type or print clearly in ink) Full legal name of applicant:

Full legal name of app	licant:					
Address:						
Phone: ()			Email:			
Social Security Number:			Date of Birth:/			
lease check one:						
ENROLLMENT IN Are you enrolled/will		б units or more pe	er semester?	☐ Yes		□ No
Which degree are you pursuing? MDIV MAB		MA	AT	MAHT		
Please circle your grad	le level at Westmins	ter Seminary Cali	fornia:			
First Year	Second Year	Third Year	Fourth Year of	r higher		
When do you anticipat	te completion of you	ır degree program	at WSC? Month	ı :	Year:	

ESTIMATED FINANCIAL ASSISTANCE

If applicable, please list all scholarships, grants, and support you plan to receive. <u>Please include</u> money paid to you or on your behalf by churches or non family members that you <u>will not</u> be reporting as income on your taxes. If you need additional space, please provide information on a separate sheet.

Scholarship Title or Outside Su	pporter	Award Amount		
		 \$		
		\$		
		Φ.		
		Ф		
		¢		
LOAN INFORMATION &		other Graduate institution?		
Indicate loan period: ☐ Full A	Academic Year (2 disbursements; Fall 2	2023 & Spring 2024)		
☐ Fall 2	2023 ONLY (2 disbursements)			
☐ Winte	er/Spring 2024 ONLY (2 disbursement	es)		
☐ Sprin	g 2024 ONLY (2 disbursements)			
Please note:				
For specific distributionFor information relate	· •			
Total amount you wa	nt to borrow for 2023-2024:			
	Unsubsidized Maximum Federal Lo	oan of \$20,500		

LENDER INFORMATION

All Stafford loans are through the Federal Government's Department of Education. Stafford loan interest rates are fixed for Graduate students and there is an origination fee deducted at disbursement. The government determines interest rates based on the 10-year Treasury Bill rate + 3.6%. For 2023-24 it appears that the interest rate is 7.05% and the origination fee is 1.057% for loans disbursed before 10/1/23.

If you have not taken out a student loan while at Westminster, you must do Entrance Counseling and possibly sign a new Master Promissory Note (MPN). These can both be done and submitted online at www.studentaid.gov. If you took out a loan through Westminster last year, you do not have to do entrance counseling or sign the MPN again.

LOAN POLICIES

<u>All students who receive loans while enrolled at WSC</u> are **required** to complete Exit Counseling prior to graduation (or any time that they exit the program). This can be done online at www.studentaid.gov or you can schedule an appointment with the Financial Aid Coordinator.

REFERENCES

Please provide *three* references. These references should be a parent, parent-in-law, or friend <u>not all at the same address</u>.

Name:				
La	ast		First	Middle Initial
Relationship (relative)	:			
Address				
			Phone #:	
City	State	Zip		
Name:				
La	ıst		First	Middle Initial
Relationship (relative)	:			
Address				
			Phone #:	
City	State	Zip		
Name:				
La	ıst		First	Middle Initial
Relationship (friend):				
Address				
			Phone #:	
City	State	Zip		
SIGNATURE AND Please read and sign				
misrepresentation or of prosecution by the fed	omission of facts eral government al Aid Office to o	shall be consid for fraud or ot btain informati	lered sufficient cause fo her criminal misconduc	best of my knowledge. I understand that or denial of financial aid and I may be subject to t. I understand that by applying for financial aid, I formation to respective offices and agencies necessary to
that eligibility for final I authorize the semina	ncial aid while a ry to apply any f	t the seminary inancial aid pr	is based on courses offi oceeds toward payment	ses related to attendance at this institution. I understand cially administered and offered through this institution. of tuition, fees or other charges billed by Westminster at my tuition, fees and other charges to WSC will be
Signature of Ap	plicant			Date