



NMSU DACC  
 MSC 3DA  
 P.O. Box 30001  
 2800 N. Sonoma Ranch Blvd, DASR 109  
 Las Cruces, NM 88011  
 Phone: 575-528-7000 Fax: 575-528-7474

## Direct Loan Acceptance Form

Student Name: \_\_\_\_\_ Phone : \_\_\_\_\_ Aggie ID: \_\_\_\_\_

**Instructions:** Please carefully read this form and complete all sections. **Any section of the form left blank, incomplete, or found to be incorrect could result in the loan request not being processed.**

**Loan Terms and Procedures**

Please read and initial:

- \_\_\_\_\_ I must be enrolled in 6 credit hours (undergraduate students) or 5 credit hours (graduate students).
- \_\_\_\_\_ I must meet Satisfactory Academic Progress to maintain my awards.
- \_\_\_\_\_ First-time freshman loan borrowers will have a 30-day disbursement hold from the first date of classes.
- \_\_\_\_\_ Single term loans will disburse 50% at the beginning of the term and the remaining 50% at the midpoint of the term.
- \_\_\_\_\_ First-time loan borrowers must complete federal Entrance Counseling and the Loan Agreement (MPN) before a loan can be disbursed. These requirements can be completed at [studentaid.gov](http://studentaid.gov).

**Loan Request Information:**

Select the terms for disbursement:  Fall \_\_\_\_\_  Spring \_\_\_\_\_  Summer \_\_\_\_\_

**Enter Dollar Amount of Student Loan:**

If requesting an increase, write additional amount only.  Subsidized Loan: \$ \_\_\_\_\_  Unsubsidized Loan: \$ \_\_\_\_\_

**Student Certification:**

By signing, I understand and agree that the loan amounts I request are dependent on annual limits set by my cost of attendance, and I may be billed if I drop below the required minimum enrollment or receive an additional award that places me over my cost of attendance. Furthermore, I affirm that I understand all of the sections completed on this form, and I understand my obligation as a student borrower to make repayment at the time I graduate from, or stop attending, a program. **Wet Signature Required.**

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

**To be completed by the Financial Aid Advisor:**

Dependent: \_\_\_\_\_ Independent: \_\_\_\_\_ GRDLVL Fall: \_\_\_\_\_ GRDLVL Spring: \_\_\_\_\_ GRDLVL Summer: \_\_\_\_\_

**Total Borrowed FASP:** Subsidized: \$ \_\_\_\_\_ Unsubsidized: \$ \_\_\_\_\_

**NSLDS**

Subsidized Loan	_____
Unsubsidized Loan	_____
Total AGG Limit	_____

Subsidized: \$ _____
Unsubsidized: \$ _____
Posted By: _____
Date: _____

**Checklist**

ROASTAT	Student is meeting SAP	_____
SFAREGF	Student is registered for minimum credit hours	_____
SFARHST	Check for midterm grades and/or current registration history	_____
RPAAWRD	Checked for overawards	_____
RRAAREQ	All requirements completed, including LOACPT	_____
RHACOMM	Comment for accepting award	_____
RNARSXX	C-flags cleared	_____
RNASLXX	Matches NSLDS, current year	_____
SGASTDN	Graduation Date	_____
RNASLXX	Updated for next academic year, if applicable (Summer)	_____

Comments: \_\_\_\_\_