Medical Student Summer 2008
Request for Additional Loans Application

The University of Kansas Medical Center Office of Student Financial Aid www.kumc.edu/studentcenter/financial.aid.html	MS 4005, 3901 Rainbow Blvd 3007 Student Center Bldg Kansas City, KS 66160	Phone: (913) 588-5170 Fax: (913) 588-8841 E-mail: financialaid@kumc.edu

If you are a medical student enrolling in summer courses and you want financial aid, please complete this form. We are required to verify your enrollment before this application can be processed. We will also verify your anticipated resources available before determining your aid eligibility. Summer aid will be based on the 2008-09 FAFSA form.

_____
Name Last (Please print) First MI

_____ _____
KU ID Start date of course/ end date

1. How much assistance are you requesting?
   Indicate the total amount requested $_____ or Maximum Available_____

If you are traveling abroad and have airfare costs that you would like to be considered as part of the cost of attendance, please attach documentation of the airfare expenses incurred.

2. What type of loans will you consider? (check all that apply)
   _____ I will consider Federal Subsidized and/or Unsubsidized Stafford Loans
   _____ I will consider a Federal Grad PLUS loan
   _____ I will consider a long term KU Endowment Loan (co-signer required)
   _____ I will consider a private loan

You will be awarded up to the amount requested, provided you have remaining loan eligibility. The total amount awarded cannot exceed need (Subsidized) or cost of attendance (Unsubsidized, KU Endowment Loan, Grad PLUS loan, Private Loan). A separate loan application will be required for a Grad PLUS, Endowment or Private Loan.

3. What other types of resources have you or will you be given for this time period?
   _____

4. Please check all that apply:
   ____ I am enrolling in elective coursework.
   ____ I am enrolling in remedial coursework at KUMC.
   ____ I am enrolling in remedial coursework at another institution (additional paperwork will be required).
   ____ I am a student in the pre-matriculation program.

After your application is processed, you will receive an email with instructions on accepting your aid in Enroll & Pay (https://sa.ku.edu).

_____ _____
Student Signature Date

Office Use Only:

FA Term ____
Budget ____
Awards ____
Email ____

Enrollment Status
_____

COA_____
-EFC _____
=Need_____
-Resource_____
=Awards_____
_____
_____