

2024-2025

STUDENT LOAN REQUEST FORM

Arizona Western College financialaid@azwestern.edu Phone: (928) 344-7634 Fax: (928) 317-6420

Name:		Student ID:					
Permanent Address:			City:		State: ZIP:		
Telephone:		Email:					
Birth Date: Completion/Expected Graduation Date:							
 □ AWC Admissions Ap □ Both the Entrance Complete the Annua □ Transfer credits from □ Attach a copy of you 	ocess, Stu pplication, ounseling I Student I all other i r Program	dent Loan Policy, and Current Year <u>FAFSA</u> , Exam & Master Promiton Acknowledgmen Institutions attended Evaluation from your	Loan Enrol ssory t (<u>stud</u>	FAQs at http://www.a I in at least ½ time cre Note (studentaid.gov dentaid.gov) ent planner account	azwestern.e edits ')	edu/finaid	
REFERENCES - These a		ferences should be diffe households one of whom			ur master pr	omissory note and should	
Full Name		lete Address	mus	Phone Number	E-mail		
I am requesting loans	for:	☐ Fall 2024		☐ Spring 2025	☐ Sum	mer 2025	
Please specify type of loans you would like to request. Both Subsidized and Unsubsidized Loans			Refer to Student Loan Policy for Ioan types and limits at http://www.azwestern.edu/finaid I would like the maximum amounts available to me.				
☐ Subsidized Loan Only			☐ I would like less than the maximum amounts.				
☐ Unsubsidized Loan Only			Specify less than maximum amount: \$				
Important Information Students/parents who enter in System. Guaranty agencies, of To track your loan information	eligible inst	titutions of higher educa					
For all "New Borrowers" on commay receive subsidized loans							
Loan applicants must meet Sa	tisfactory /	Academic Progress Sta	ndard	s established by the A	NC office o	f Financial Aid.	
By signing this form, you certif policy, application process ste					s form as w	ell as the student loan	
Student Signature:			Date:				