**Medical University of Bialystok (MUB)**

**U.S. Federal Direct Loan Program**

**STUDENT DATA SHEET**

**2020-2021**

**FINANCIAL AID OFFICE**: Dean’s Office, English Language Division

Ms. Elwira Baclawska, Financial Aid Officer : elwira.baclawska@umb.edu.pl

Ms. Jane Sutter, U.S. Financial Aid Consultant: jsutter@hmi-edu.org.

**STUDENT ELIGIBLITY**: *To receive Direct Loans, recipients must be either permanent residents or citizens of the United States, be enrolled in Medical University of Bialystok, MD program at least half-time, maintain satisfactory academic progress and not be in default on any prior U.S. government guaranteed loan. These guidelines are subject to statutory and/or regulatory changes in the U.S. Higher Education Act and the Title IV Program Regulations.*

**APPLICATION PROCESS:** *Students who wish to apply for the U.S. Federal Loan Program must complete and return the Financial Aid Data Sheet to the Office of Financial Aid****.*** *Financial Aid packages are available in the Financial Aid Office and emailed to U.S. Students upon request. The Bialystok GUIDE to Financial Aid Applications provides step by step instructions for the loan application process.*

**ACKNOWLEDGEMENT OF FINANCIAL RESPONSIBILITY**

**I have reviewed the current copy of the Institution’s Catalog and Student Handbook on the Institution’s website. I understand the policies of the Institution. I understand that I must maintain satisfactory academic progress as outline in the Institutions Catalog and the Student Handbook. If I am participating in the Federal Stafford Loan Program(s), then I am acknowledging that , by signing this acknowledgment, I have completed a student Loan entrance interview and have received information on borrower rights and responsibilities. I understand that if the FAO requests additional information for the completion of my request for financial assistance, it is my obligation to promptly respond to their request. I further acknowledge that I am have a maximum of 30 days to respond to such request from the FAO.**

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do herby acknowledge that I have read and reviewed the terms and responsibilities associated with receiving federal student loans.**

**PRINT STUDENT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_**

**STUDENT PROFILE DATA:**

 **1)First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial \_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2) Gender: Female \_\_\_\_\_ Male \_\_\_\_\_**

**3) Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4) Social Security Number \_\_\_\_\_ \_\_\_ \_\_\_\_\_\_**

**5)E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**6) Marital Status: Single (never married) Married \_\_\_\_\_ Divorced \_\_\_\_\_\_ Separated \_\_\_\_\_\_\_\_\_**

**7)Permanent Address: Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **City \_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_\_ Country \_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_**

**8) Address while at School: Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **City \_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ zip Code \_\_\_\_\_\_\_ Country \_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_**

 **9) Terms and Attendance: Fall 2020 \_\_\_\_ Spring 2021 \_\_\_\_\_ in this academic year.**

**10) Full Time (FT) or Half Time (HT) Attendance: Fall 2020\_\_\_\_\_\_\_\_ Spring 2021 \_\_\_\_\_\_\_\_**

**11) Year in Medical Doctor program of Study: 1\_\_\_\_ 2 \_\_\_ 3 \_\_\_ 4 \_\_\_\_ 5 \_\_\_\_ 6 \_\_\_\_ 7 \_\_\_\_**



**11) Where will you live during the school year: On campus \_\_\_\_ Off Campus \_\_\_\_**

**ACKNOWLEDGEMENT OF STUDENT LOAN TERMS**

**The following information and statements apply to your application for a U.S. Federal Direct Student Loan (FDSL). It is necessary under federal regulatory guidelines for you to state you understanding of the responsibilities you assume when you receive a FDSL.**

1. **I ACKNOWLEDGE THAT I AM AN ELIGIBLE Permanent resident or citizen of the United States and I am completing an application for the U.S. Federal Loan program online with the U.S. Department of Education.**

**2) I may only use my Student Loan for educational and education-related expenses.**

1. **I understand that the loans) I am being offered will be taken into consideration when determining other types of student assistance I may receive. The total amount of my financial aid may not exceed the cost of attendance (COA) less my expected family contribution. Questions regarding the amounts and types of student assistance may be directed to the financial aid representatives serving my school.**

**4) I understand that it is a Federal regulation that I be enrolled at least half-time as defined by my school in order to receive Federal student loans. Questions regarding the definition of half-time enrollment may be directed to the financial aid office.**

**5) I must repay this loan with all accrued interest and capitalized interest and deducted fees. I understand that I have the option of paying the interest on my unsubsidized loans while I am in school. If I do not pay the interest while I am in school the lender, will add it to the unpaid principal amount of my loan. This is called “capitalization”. For more information, I need to contact my lender.**

**6) For FDSL, I have a maximum of 10 years to repay this loan unless my loans are consolidated. For FDSL, I may extend the repayment plan to a term not to exceed 25 years.**

**7) I may repay all or part of this loan early without penalty.**

**8) The minimum monthly payment is $50, but can be more depending on the total amount borrowed. Repayment will begin following a 6-month grace period. This grace period begins the day after I graduate, withdraw from school, or drop below half-time status.**

**9) The interest rate for my loans(s) is specified in my master promissory note. I understand that the interest rate may vary according to the financial marketplace, but will not exceed 8.5%. In addition, I understand that if I receive an Unsubsidized Loan, interest will accrue from the day the loan is disbursed until it is repaid in full. I also understand that I may pay the interested while enrolled in school or request to my lender capitalize the interest (add the interest to the principal) while I am enrolled in school.**

**10) I understand that if I have a change of name, address, telephone number, graduation date, enroll less than half time, withdraw from school., or transfer to another school, I am required to notify my lender.**

**11) I will be notified in writing if my loan in transferred to a new lender. If that event should occur, I must direct all future correspondence to the new lender.**

**12) If I qualify, I may apply for a postponement of my loan payments. This is known as a deferment. If I do not qualify for a deferment and am unable to make payment on my loan, I may request forbearance from my lender.**

**13) I understand that I must repay the loan even if I do not complete my education, if I am not satisfied with my education, or if I cannot find employment. Examples of monthly repayment plans are available in the borrower’s rights and responsibilities section of my Master Promissory Note (MPN). I understand I may contact my lender for additional information.**

**14) I understand it is my responsibility to notify the financial aid office should it become necessary for me to withdraw prior to completing my program of study. I further understand that I must complete an exit interview, which includes information regarding my repayment options and the use of the loan consolidation process.**

**15) If I fail to repay my student loan or if my loan becomes 270 days delinquent, I will be considered in default and the following may result:**

* **A national credit bureau will be notified and it will have a negative effect on my credit rating for at least seven years.**
* **My wages may be garnished.**
* **My federal and state income tax refunds may be withheld**
* **Legal action may be taken against me**

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do herby acknowledge that I have read and reviewed the terms and responsibilities associated with receiving federal student loans.**



