



Southeastern Illinois College  
 Financial Aid Office  
 3575 College Rd.  
 Harrisburg, IL 62946  
 Phone: (618) 252-5400 Fax: (618) 252-3062  
 Email: [fao@sic.edu](mailto:fao@sic.edu)

# 2017-2018 Loan Request Form

**Please complete the following before submitting your loan request form.**

1. Complete FAFSA.
2. Complete Private Loan Entrance Counseling.
3. Indicate below your total outstanding private and federal student loans (if applicable).
4. Return Loan Request Form to the Financial Aid Office for processing.
5. Check your mail for a letter from the Financial Aid Office, which will be sent when your loan has been certified.

**Step 1: Student Information**

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Home/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Lender Name: \_\_\_\_\_

Outstanding Private Loans: \$ \_\_\_\_\_ Outstanding Federal Loans: \$ \_\_\_\_\_

**Step 2: Cost of Attendance and Estimated Financial Aid**

Cost of Attendance: \$ \_\_\_\_\_

Estimated Financial Aid: \$ \_\_\_\_\_

Total Amount Requested: \$ \_\_\_\_\_

Difference: \$ \_\_\_\_\_

Interest Rate: \_\_\_\_\_ Anticipated Monthly Payments: \$ \_\_\_\_\_

**Step 3: Amount Requested**

NOTE: Remember the loan has to be repaid. **ONLY** request what you need!  
 Check all terms you would like to receive a private loan and enter the amount.

- |                                      |                            |
|--------------------------------------|----------------------------|
| <input type="checkbox"/> Fall 2017   | Amount Requested: \$ _____ |
| <input type="checkbox"/> Spring 2018 | Amount Requested: \$ _____ |
| <input type="checkbox"/> Summer 2018 | Amount Requested: \$ _____ |

*Continue to the next page.*

