



SUNY  
DOWNSTATE  
Medical Center

**Undergraduate Loan Acceptance Form  
2017-2018**

Name \_\_\_\_\_ ID \_\_\_\_\_

Please remember that you do not have to accept any of the loans offered. Also, note that the loan amounts offered are the **MAXIMUM** you may borrow. You should carefully examine your own budget and borrow the very least amount you feel is necessary.

*\*Federal Direct Stafford Loans for undergraduate students, as of July 1, 2017, has a fixed interest rate of 4.45% and origination fee of 1.069%*

**Please check off ONE only:**

Sum/Fall/Spr      Sum/Fall      Fall/Spr      Fall only      Spring only      Summer only

**I wish to decline:**

- All loans

**I wish to accept the following Offered Fund(s) and Amount(s):**

<u>Fund Type</u>	<u>Amount</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**All first time Direct Loan Borrowers must complete the following:**

- [Master Promissory Note](#)
- [Entrance Interview Session](#)

**Please sign:** I declare that the above information is correct. I understand that if I have accepted a loan in the Stafford Program, I must have a Master Promissory Note at: <https://studentloans.gov> before funds will be available, and that I may still reject the loan 1) by not signing the promissory note, 2) By asking for a reduction in a future disbursement 3 weeks prior to the scheduled disbursement or 3) by refusing to sign the loan check and asking for it to be returned to the lender. I am also aware that I may repay the loan early without penalty, except that loan fees will not be rebated in the case of early repayment. **4) Must be registered in at least half time enrollment (UG- 6crs. Grad/Med- 5crs)**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

[Office of Student Financial Aid](#)  
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