

## Perkins Loan Entrance Counseling

Name: \_\_\_\_\_ Social Security: \_\_\_\_\_

Please certify that you have read and understand the statements below by initialing the box beside each statement.

- I understand that it is my responsibility to ensure that Carroll College Perkins Loan Office is informed when I: Change my address and phone number; move to a different school; or change my enrollment status to less than half time.
- I understand I may borrow up to \$4,000 for each year of undergraduate study depending on my level of need, and Carroll College's funding level (the total amount I can borrow as a undergraduate is \$20,000).
- I understand that nonreceipt of bills, forms or other correspondence is not a defense against default.
- I understand I must repay my Perkins Loan in all cases except qualifying discharge situations such as death, permanent and total disability, false certification of ability to benefit, school closure, or unpaid refund discharge.
- I understand that my Perkins Loan may be cancelled if I perform qualifying service in teaching, early intervention services, law enforcement or corrections, nursing or medical technician, or work in child or family services.
- I understand my payment will not be less than \$40 per month.
- I understand that in certain cases I may qualify for forbearance or a deferment that would allow me to not make payments on my loan.
- I understand forbearances are at the discretion of the Carroll College Perkins Loan Office and may be denied. Interest will continue to accrue during a forbearance period.
- I understand if I default on my Perkins Loan, Carroll College may pursue the following to enforce payment:
  - Put a hold on my final grade transcript;
  - Garnish my wages and/or refer my account to a professional debt collection agency;
  - Assign defaulted loan to the Department of Education for final collection
- I understand that a default on my Perkins Loan will show on my credit report for 7 years from the date that is paid in full and cannot be removed. This adverse credit rating may prevent me from obtaining financing for a home, car, credit card or other financing.
- I understand that if I default, I will not be eligible for any federal financial aid including Pell Grants.
- I understand that I can get information on all my student loans at [www.nslds.ed.gov](http://www.nslds.ed.gov)
- I understand if I am unable to resolve a dispute with my lender/servicer I may call the federal ombudsman at 1-877-557-2575

I certify that to the best of my knowledge the above information is true and exact. I certify I have read and understand each of the above statements, which I have initialed.

Signature \_\_\_\_\_ Date \_\_\_\_\_



CARROLL COLLEGE

# Perkins Loan Questionnaire

## Instructions

Please return this questionnaire to the Financial Aid Office immediately. Failure to do so may result in cancellation of loan assistance previously authorized.

## Student Information

Name (Last)		(First)	(Middle Initial)
Birthdate		Social Security Number	
Permanent Phone #		Current Phone #	
Driver License #		State of Issue	
Permanent Mailing Address			
Current Mailing Address			
Name of Spouse		Your Maiden Name or other Name(s) You Have Used	
Your Father	Name	Address	Phone
	Employer	Employer's Address	Phone
Your Mother	Name	Address	Phone
	Employer	Employer's Address	Phone
Other References Who will Always Know Where to Reach You	Name 1.	Address 1.	
	2.	2.	
Other University or Secondary Schools Attended	Name 1.	Address 1.	
	2.	2.	
	3.	3.	

## STATEMENT OF EDUCATIONAL PURPOSE

I certify that I will use any money I receive under the Federal Perkins Loan Program only for expenses related to my studies at Carroll College, and I authorize these funds to be applied to my student account.

Signature \_\_\_\_\_ Date \_\_\_\_\_