



STUDENT LOAN ACCEPTANCE FORM

Student Loan applications cannot be processed until all requirements have been met. All borrowers must complete this form or accept through their self-service portal for each loan they borrow. It can be mailed to the Financial Aid Office, Garden City Community College, 801 Campus Drive, Garden City KS 67846, faxed to 620-276-9650 or emailed to finaid@gcccks.edu. A Federal Direct Loan Master Promissory Note (MPN) and Loan entrance counseling is required for first-time borrowers.

STUDENT NAME _____ ID# _____

PERMANENT ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE # _____

1. Indicate the semester(s) for which you are borrowing a loan:

____ *Fall/Spring
(Aug 2024-May 2025)

____ Fall Only
(Aug 2024-Dec 2024)

____ Spring Only
(Jan 2025- May 2025)

2. Enter the TOTAL amount of Stafford Loan you are requesting for the semester(s) you marked:

\$ _____ *Fall/Spring loan amounts will be split equally between the two semesters.

_____ Initial here if you do not want to be considered for an unsubsidized loan.

Borrower Signature _____ Date _____

I understand that my Stafford Loan funds will be applied to my educational charges at Garden City Community College before I receive any refund from the loan.

DEADLINES FOR SUBMITTING LOAN REQUIREMENTS:

FALL ONLY LOANS- DECEMBER 3, 2024 OR 7 BUSINESS DAYS PRIOR TO YOUR LAST DAY OF ATTENDANCE, WHICHEVER OCCURS FIRST.

FALL/SPRING AND SPRING ONLY LOANS- MAY 6, 2025 OR 7 BUSINESS DAYS PRIOR TO YOUR LAST DAY OF ATTENDANCE, WHICHEVER OCCURS FIRST.