



# Federal Direct Loan Program Borrower Information Sheet

**Print:** Student Name \_\_\_\_\_ HCC ID #: \_\_\_\_\_

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

Phone Number \_\_\_\_\_ Cell Phone (if applicable) \_\_\_\_\_

## Section 2- References

### Must Complete Entire Section

References

(Individuals who would be able to contact you over the next two-three years).

Name	Name
Street Address	Street Address
City, State, Zip Code	City, State, Zip Code
Telephone	Telephone
Relationship	Relationship

**Note that the Financial Aid Office may verify the accuracy of the information you provide on this form.**

**Your Signature and Date**

I have read and I understand my rights and responsibilities as a borrower. I also understand that I must repay my loan according to the terms of the promissory note.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please submit in person to the Financial Aid Office during walk-in hours, mail (1500 W Raab Road Suite 1101, Normal IL 61761), fax (309-268-7962), or by upload (instructions on task tile). **We will not accept documents by email.**

**Walk-in hours for financial aid are daily from 12:00 p.m.-4:00 p.m.**