



Student's Last Name: _____ First and Middle Names: _____

Student's UNC-CH Personal ID:

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2016-2017 HEALTH PROFESSIONS STUDENT LOAN (HPSL) APPLICATION

General Information: The Health Profession Student Loan program (HPSL) is administered by the Department of Health and Human Services. **APPLYING FOR THIS LOAN IS OPTIONAL.** All students interested in applying for this loan must complete the Free Application for Federal Student Aid (FAFSA) with parental income information.

Loan Terms: The interest rate on the HPSL is 5%. The borrower will not be responsible for any interest until the start of the repayment period. Repayment begins 12 months after program completion or termination of full-time enrollment.

Loan Amount: The amount awarded will be determined by fund availability and number of qualified applicants.

Application Procedures:

- Submit the 2016-2017 FAFSA at www.fafsa.ed.gov. **You must provide parental information (including parental income and assets) on your FAFSA. Parental information must be included on the FAFSA regardless of age or marital status in order to be considered for HPSL.**
- Submit the HPSL application to the Office of Scholarships & Student Aid (OSSA). Include signed copies of your (*and your spouse's, if applicable*) 2015 Federal income tax returns **AND** signed copies of your parent(s)' 2015 Federal income tax returns.
- **All applications and required documents are due by May 30, 2016. Incomplete Applications will not be considered.** *Students are not necessarily notified of incomplete applications.*

A. PARENTS HOUSEHOLD INFORMATION

List all people your parent(s) and/or stepparent(s) will support between July 1, 2016 and June 30, 2017. **PLEASE NOTE that all requests for parental information include any stepparents residing within the same household**

Full Name	Age	Relationship	College (if enrolled)

B. TAX FORMS AND OTHER INFORMATION

Attach a signed copy of all 2015 Federal income tax returns from the student (*and spouse if applicable*) **AND** parent(s) and/or stepparent(s). Acceptable tax forms include IRS FORMS 1040, 1040A, 1040EZ, or a foreign income tax return.

1. Tax return(s) (check all that apply):

<input type="checkbox"/> Student	<input type="checkbox"/> Student's Spouse	<input type="checkbox"/> Student and Spouse Joint Return
<input type="checkbox"/> Father/Stepfather	<input type="checkbox"/> Mother/Stepmother	<input type="checkbox"/> Parents' Joint Return

2. If the student (*or spouse if married*) or parent(s) did not file and are not required to file a 2015 Federal income tax return, check all boxes that apply:

<input type="checkbox"/> Student	<input type="checkbox"/> Student's Spouse
<input type="checkbox"/> Father/Stepfather	<input type="checkbox"/> Mother/Stepmother

3. If the student (and spouse if married) or parents **did not file, and are not required to file**, a 2015 Federal income tax return list all income amount(s) and source(s) below. *If you will file, or have already completed a 2015 federal tax return, proceed to question #4.*
- Enter information for 2015 using annual, not monthly, amounts.
 - Please submit copies of all 2015 W-2s.
 - Attach an additional sheet if necessary.

Employer/Source of Income	Student/Spouse 2015 Taxed Income	Parent(s) 2015 Taxed Income
	\$	\$
	\$	\$
	\$	\$

4. Please complete the worksheet below:
- Enter information for 2015 using annual, not monthly, amounts.
 - Answer all questions entering “0” where appropriate. **PLEASE DO NOT LEAVE ANY BOXES BLANK.**

Untaxed Income	Student/Spouse 2015 Untaxed Income	Parent(s) 2015 Untaxed Income
Child support received for all children:	\$	\$
Worker’s compensation or disability:	\$	\$
Other Untaxed income	\$	\$

C. PARENT ASSET INFORMATION

	Amount
As of today, what is your parent(s)/stepparent(s)’ total current balance of cash savings and checking accounts?	\$
As of today, what is the net worth of your parent(s)/stepparent(s)’ investments, including real estate (do not include the home you live in)?	\$
As of today, what is the net worth of your parent(s)/stepparent(s)’ current business and/or investment farms (do not include a family farm or business with fewer than 100 full-time employees)?	\$

D. SIGNATURES

Note: If corrections to your FAFSA information are necessary, the Office of Scholarships and Student Aid will electronically send the corrections to the Federal Processor, who will then send you an updated 2016-2017 Student Aid Report for your records.

Certification Statement

By signing this worksheet, I (we) certify that all information provided on this form and any accompanying documentation provided to qualify for Federal student aid is complete and correct to the best of my (our) knowledge. I (we) understand that if I (we) purposely give false or misleading information, that HPSL eligibility will be forfeited.

Signature of Student _____ Date _____

Signature of Parent _____ Date _____