



2009-2010 ALTERNATIVE LOAN UNEQUAL DISBURSEMENT REQUEST

MAIL OR FAX COMPLETED FORM TO:

Hamline University
 Office of Financial Aid
 1536 Hewitt Avenue
 St. Paul, MN 55104
 Voice: 651.523.3000
 Fax: 651.523.2585

Name of Student (Please Print)	
Last	First MI
Date	Telephone Number
	()
Hamline ID#	Email Address
SIGNATURE:	
<hr/> Student's Signature	

Your financial aid award letter may include an alternative loan (excluding PLUS and Graduate PLUS). When you apply for this loan we normally split the amount evenly between the semesters for which you are enrolled. If you have applied for/ will apply for an alternative loan and would prefer to have your loan funds unequally divided between semesters, please advise us on how much you need for each term.

The amounts for each semester may be unequal but may not exceed the maximum alternative loan amount listed per semester on your financial aid award letter.

With which lender did you apply/ will you apply? _____

Total of alternative loan application \$_____

How much of this loan would you like disbursed for the following terms?

- \$_____ Summer -- 2009
- \$_____ Fall -- 2009
- \$_____ Winter-- 2010
- \$_____ Spring -- 2010
- \$_____ May Term -- 2010

- \$_____ **Total**

*****Please note: This is not a loan application. You must also apply for your alternative loan at www.hamline.edu/fa.**