

Student Financial Services

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2024-2025 HPSL Application (F25HPL)

The Health Profession Student Loan program (HPSL) is administered by the Department of Health and Human Services. All students who apply for this loan must have completed the Free Application for Federal Student Aid (FAFSA). The amount awarded will be determined by the number of applications and fund availability. The interest rate on the HPSL is 5%. The borrower will not be responsible for any interest until the start of the repayment period. A one year (12 month) grace period follows completion or termination of full time status. Additional options are available including deferment, forbearance, renegotiation, and consolidation. More detailed information on these options will be provided when you complete your entrance interview at the time you sign your promissory note, and an exit interview will be required prior to graduation. These steps will be completed through our loan servicer Heartland ECSI at <u>www.heartlandecsi.com</u>.

- If your parents are deceased, please contact our office regarding information needed
- Any incomplete applications will not be considered. Incomplete is defined as:
 - o Missing tax information for student, spouse, and/or parents for the 2022 tax year
 - o Missing student and/or parent signature on the application
 - o Missing signatures on the appropriate lines of the 1040 Form (Federal Tax Return)
- Even though you are an Independent student, we are required to collect parental information for the HPSL loan.
- The changes may impact your federal loan award, if awarded up to your cost of attendance prior to being offered a HPSL loan. We will notify the student of any impacts the HPSL loan has on his/her award.
- Priority deadline for consideration is August 1, 2024

Section 1 – Student Information

Last Name	First Name	M.I.
UMSL Student ID	Date of Birth	Phone Number (include area code)
Section 2 – Parent Information		
Last Name	First Name	M.I.
Date of Birth	Relationship to Student	Legal State of Residency
Single Unmarried and both lega parents living together	I 🗌 Married 🗌 Remarried	Separated Divorced Widowed

Section 3 – Parent Household Information

Please include all household members in the parents' household including:

•Yourself (the student), your spouse

•Your parent(s)

•Any other individuals in your parents' household for which they will provide more than half of their financial support between July 1, 2024, and June 30, 2025

•Do not include foster children.

Full Name	Age	Relationship to Student
		Self/Student
		Student Spouse
		Parent/Stepparent
		Parent/Stepparent

If necessary, attach a separate sheet of paper with additional household members.

Please indicate how many people in the parent's family will be in college between July 1, 2024 and June 30, 2025. _____ (Do not include parents)

Section 3 – Student Tax Information

Check only one box below regarding STUDENT AND SPOUSE, if currently married

Check here if you were not required to file a 2022 Tax Return but had earned income and are attaching a copy of your W-2(s) or Wage and Income Transcript.

Check here if you did not earn income and did not file and were not required to files taxes in 2022.

**Please note, if there was a change in your marital status and you were unable to use the FA-DDX, we will need a signed tax return or tax transcript from both you and your spouse

Section 3 – Parent Tax Information

Check only one box below regarding PARENT INFORMATION

Check here if you filed a 2022 Tax Return and are attaching a signed copy of your 2022 Tax Return (including schedules 1, 2 & 3, if applicable) and W-2 (s) or are attaching your 2022 Tax Return Transcript and Wage and Income Transcript.

Check here if you were not required to file a 2022 Tax Return but had earned income and are attaching a copy of your W-2(s) or Wage and Income Transcript AND a 2022 IRS verification of non-filing letter.

Check here if you did not earn income and did not file and were not required to file a 2022 Federal Tax Return and are attaching a 2022 IRS verification of non-filing letter.

*Please note, if you filed separately from your spouse, we will need their tax information or non-filing letter as well

Section 4 – Federal Benefits Received (Parent) Select apply that apply					
	Earned income credit (EIC)		Refundable credit for coverage under a qualified health plan (QHP)		Temporary Assistance for Needy Families (TANF)
	Federal housing assistance		Supplemental Nutrition Assistance Program (SNAP)		Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
	Free or reduced-price school lunch		Supplemental Security Income (SSI)		Medicaid
	None of these apply.				

Section 5 – Parent Income and Assets

	Annual amount	Parent 1	Parent 2
Taxable Income	This would include wages, business and/or farm income.	\$	\$
Other Taxable Income	This would include alimony, capital gains, pensions, annuities, etc.	\$	\$
Non-Taxable Income	This would include child support.	\$	\$
Other Non-Tax Income	Indicate what is included in this amount:	\$	\$
Current total of cas	sh, savings, and checking accounts	\$	\$
	of investments, including real estate ome the parent lives in.)	\$	\$
Current net worth	of businesses and investment farms	\$	\$

Section 6 – Student and Parent Signatures

By signing this application, I certify that all of the information reported to qualify for federal student aid is complete and correct. The student's signature is required as well as at least one parent whose information is being added to the FAFSA for the HPSL loan.

Student spouse and parent #2 signatures are optional.

Student Signature	Date	Parent Signature	Date
Spouse Signature	Date	Parent #2 Signature	Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.