



# { Student Loan Acceptance 2019-2020 }

**Please print all information legibly.**

In order to accept your student loan, please complete the following:

\_\_\_\_\_  
Last Name First Name Middle Initial

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

0						
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Student ID #

Please put a check mark in the appropriate box to indicate whether you **ACCEPT** or **DECLINE** your student loans for the 2019-2020 school year.

- ☐ I **ACCEPT** my student loans for 2019-2020
- ☐ I **DECLINE** my student loans for 2019-2020

\_\_\_\_\_  
Student Signature Date

## Return to:

Office of Financial Aid  
Hocking College  
3301 Hocking Parkway  
Nelsonville, OH 45764