

**University of Arkansas for Medical Sciences**  
**Health Professions Student Loan (HPSL) Interest Form**  
**2024-25 Application for Admitted Pharmacy Students ONLY**

PLEASE COMPLETE AND RETURN THIS FORM TO THE FINANCIAL AID OFFICE, 4301 WEST MARKHAM #864, LITTLE ROCK AR 72205 OR EMAIL TO [FINANCIALAID@UAMS.EDU](mailto:FINANCIALAID@UAMS.EDU) OR Fax 501-686-8002. Priority Deadline: May 15<sup>th</sup>.

The Health Professions Student Loan (HPSL) is a need-based low-interest loan. **To be considered for the HPSL, College of Pharmacy students must provide a signed copy of parents' 2022 federal tax return, regardless of their independent status for all other loan programs.** Graduate students are considered independent for federal financial aid eligibility; however, regulations by the US Department of Health Resources and Human Services require schools to consider parents' information for awarding HPSL funds. Although the loan is made with government funds, UAMS contributes a share and is the institutional lender. Our loan servicer, ECSI Heartland, services HPSL loans from UAMS.

The purpose of this form is to assist the Financial Aid Office with identifying students who are interested in receiving the Health Professions Student Loan. Your Student Aid Report (SAR) will determine if you are eligible for consideration. Funds are limited and will be awarded to eligible students on a first come basis. If you have questions regarding the HPSL Pharmacy Loan, please contact our office at (501) 686-5451.

### Application Instructions:

Your application will not be processed until all documents are received. Please read the below requirements carefully.

- **Submit a 2024-2025 Free Application for Federal Student Aid (FAFSA) on [www.fafsa.ed.gov](http://www.fafsa.ed.gov).** Only U.S. Citizens, permanent residents, or eligible non-citizens may apply. **Regardless of your actual dependency status, ALL applicants MUST provide student and (both) parents' financial information. Failure to provide this information will result in being ineligible for HPSL funds. The parent information does not affect your other federal student aid. The ONLY exception allowed for this loan is if they are both deceased.**
  - If your parent(s) are deceased, you are required to submit copies of death certificates.
  - If your parents are divorced, you must submit both parents signed federal tax return or transcript. We must verify income for both parents to determine eligible for this loan.
- **Utilize the IRS DRT on the FAFSA or submit tax information.** When completing the FAFSA, we encourage you to use the Data Retrieval Tool (DRT) to pull the student, and spouse (if applicable) tax information. This tool allows you to submit accurate responses to tax-related questions. If the DRT is not available for you or you are unable to complete the process, please read below:
  - Submit yours (and spouse, if married) and both parents signed 2022 IRS Tax Return Transcript(s) or tax returns. To request the transcript(s), go to <https://www.irs.gov/>.
  - If you and/or your parents were not required to file a 2022 tax return, you must submit a copy of the IRS Verification of Non-Filing letter. To request the letter, go to <https://www.irs.gov/>.
  - If an income of \$0 is submitted for you, your spouse or either parent, a signed statement with an explanation of why no income was reported is required. (Example: Spouse is also a student and was not employed, etc.)
- **Submit a 2024-2025 HPSL application to the Financial Aid Office.** Priority deadline is May 15<sup>th</sup>. Applications are accepted all year.

### TERMS OF THE HPSL PHARMACY STUDENT LOAN

- 5% Fixed Interest Rate
- No fees are deducted from your loan.
- No interest accrues during school.
- 12-month grace period
- No interest accrues during approved periods of deferment.

### CONDITIONS OF THE HPSL PHARMACY STUDENT LOAN

- **NEED BASED** - Must have financial need as determined by the FAFSA. COA less your SAI and less PC=Need.

**Please sign below if you wish to be considered for the HPSL Pharmacy Student Loan.** You will be approved based on your ISIR and on the availability of funds. *This form is not an official promissory note but will be used by our office to identify students who wish to be considered for the HPSL Pharmacy Loan.* If you are awarded funds, you will receive an award notification along with instructions to sign the MPN.

**Student Name:** \_\_\_\_\_ **UAMS Student ID:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Anticipated Level (circle one):** P1 P2 P3 P4 **Phone Number:** \_\_\_\_\_