**Nurse Faculty Loan Program Application**

**2025-2026**

The purpose of the Nurse Faculty Loan Program (NFLP) is to increase the number of qualified nursing faculty to facilitate education of the nurses need to address the nursing workforce shortage. The program offers partial loan forgiveness for borrowers who graduate and serve as full-time nursing faculty for the prescribed period of time. The NFLP is funded through the Health Resources and Services Administration (HRSA) and is administered by California Baptist University.

**Eligibility**

To be considered for NFLP a student must:

* Be a citizen or national of the U.S. or a lawful permanent resident.
* Be enrolled at least half-time in a graduate (Masters or Doctoral) level program.
* Maintain enrollment for a minimum of two consecutive terms/semesters during an academic year while receiving the NFLP support.
* Be in good academic standing.
* Not have a judgment lien entered against him/her based on the default on federal debt (28 U.S.C. 3201(e)).
* Have the intention of working as a nurse faculty on a full-time basis upon graduation.

**Application Process**

NFLP guidelines specify that priority consideration be given to students who received NFLP support in the previous academic year. New and continuing students interested in consideration for the NFLP must:

* Be accepted into either the CBU Master of Science in Nursing – Nurse Educator (NE) Concentration or Doctor of Nursing Practice (DNP) program.
* Complete a Free Application for Federal Student Aid (FAFSA) at [www.fafsa.gov.](http://www.fafsa.gov/) The student is not required to demonstrate financial need; the FAFSA will provide confirmation of citizenship status and student loan default.
* Submit a completed CBU NFLP application form to the College of Nursing and complete an interview with the NFLP Director.

**Awardee Responsibilities**

If awarded an NFLP Loan, the student must

* Accept or decline the loan through InsideCBU.
* Complete a Loan Entrance Interview.
* Complete an NFLP Promissory Note and self-certification form.
* Complete the education component(s) required to prepare qualified nurse faculty prior to completing the program of study.

**Interest**

The NFLP loan will bear interest on the unpaid balance of the loan at the:

* Rate of 3% beginning 3 months after the borrower graduates from the advanced nurse education program and becomes employed as full-time nurse faculty at an accredited school of nursing for a four-year period; **or**
* Prevailing market rate, as established by the Treasury Department, if the borrower fails to complete the advanced nurse education program or fails to establish full-time employment as faculty full-time as prescribed by HRSA.

**Loan Cancellation**

The school will cancel an amount of up to 85% of the principal and interest on an NFLP loan over a 4-year period as follows:

* Upon completion by the borrower of each of the first, second, and third year of full-time employment as a faculty member at an accredited school of nursing, California Baptist University will cancel 20% of the principal of and interest on the NFLP loan, as determined on the first day of employment; **and**
* Upon completion by the borrower of the fourth year of full-time employment as a faculty member at an accredited school of nursing, California Baptist University will cancel 25% of the principal of and interest on the NFLP loan, as determined on the first day of employment.

**Repayment**

The NFLP loan is repayable in equal or graduated periodic installments over a 10-year period beginning 9 months after the borrower completes the advanced nurse education program, ceases to be enrolled as a student in the advanced nurse education program, or ceases to be employed as full-time nurse faculty. Failure to meet the terms of the loan forgiveness terms will result in repayment of the loan at the general market interest rate.

**Please review the “Nurse Faculty Loan Program Conditions and Requirements” for more detailed information regarding the terms and eligibility requirements for the Nurse Faculty Loan Program**.

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This form must be completed *in its entirety* and returned to the College of Nursing before an NFLP Loan offer is made. Students must reapply each semester for funding, even if they have received NFLP funding in the past.

**Priority Deadline: September 15 (fall), January 15 (spring), May 15 (summer)**

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| **Section I** |
| Applicant Name(Last) (First) (M.I.) |
| Student ID Number: Last four digits of SSN: |
| Date of Birth (mm/dd/yy): / / Phone Number: home cell (circle one) |
| Current Address (street, apt #, city, state, zip): |
| Degree Program: [ ] MSN [ ] DNPExpected date of degree completion  | Number of credits for which you will register: Fall 2025 Spring 2026  Summer 2026 |
| Applicant Status: [ ] First Time Applicant [ ] Prior NFLP RecipientWill you be continuing your formal education during the next academic term? [ ] Yes [ ] No |
| U.S. Citizen? [ ] Yes [ ] No If no, citizenship status: |
| Ethnic Origin: [ ] American Indian/Alaskan Native [ ] Asian/Pacific Islander [ ] Hispanic[ ] Black, non-Hispanic [ ] White, non-Hispanic [ ] Two or more races |
| I am [ ] am not [ ] in default of a federal or other loan | Are you from a rural residential background? [ ] Yes [ ] No |
| Veteran Status: [ ] Veteran (retired) [ ] Veteran (prior service) [ ] Active Duty Military [ ] Reservist [ ] Not a veteran |
| Although financial need is not a criteria, California Baptist University requires all students to submit a Free Application for Federal Student Aid (FAFSA) for consideration.[ ] Yes, I submitted my FAFSA [ ] No, I did not submit my FAFSA |
| Have you incurred any other service obligation under any other federal education programs? [ ] Yes [ ] No**Note**: Any service agreement/obligation incurred under another federal program for education support must remain separate and distinct from and cannot be combined with the Nurse Faculty Loan Program. |
| Are you receiving any financial assistance for your degree program (for example, employer reimbursement, scholarships, VA benefits, etc.)? If so, please list the type and amount:Amount: $ /year Amount: $ /year |
| **Section II** |
| AcknowledgmentI, the above-named applicant, have been informed that I must agree to the service obligation associated with the Nurse Faculty Loan Program in order to be eligible to receive the loan under this program.The above information is true and accurate, and I hereby authorize verification as required by the school.Printed Name: Date: Signature:  |

Priority is given to those students who received NFLP in previous years. New applicants are chosen on a first come, first serve basis until funds are exhausted. Loan eligibility for additional years is contingent upon yearly funding granted by The Department of Health & Human Services, Health Resource and Services Administration.

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