

STUDENT EMERGENCY LOAN APPLICATION

PLEASE PRINT ALL INFORMATION

Full Name

_____ Last _____ First _____ Middle _____

Local Address

_____ Street/Dorm/Apartment _____

_____ Email _____
City _____ State _____ Zip _____

Local Phone # (____) _____ Driver's License Number _____ State _____

Undergraduate _____ Graduate _____

Expected Graduation Date (month/yr) _____ Birth Date _____

State the reasons a loan is needed. Include information about the circumstances which have created the emergency and the purpose for which funds are needed. Continue on a separate sheet of paper if necessary.

List the names, phone numbers, and complete addresses of one parent (or relative) and one NON-STUDENT, living at different addresses, who will always know your address. They should not be the same addresses as the local address listed above. The loan will not be approved without this information.

1. _____
parent's/relative's name street, city, state, zip area code & phone #

2. _____
non-student's name street, city, state, zip area code & phone #

Amount Needed \$ _____ Proposed Repayment Date _____

Sources of Repayment (be specific)

Do you currently have an outstanding student emergency loan? Yes ____ No ____

Do you have any outstanding, past due university charges for tuition and fees? Yes ____ No ____

Applicant's Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE

Prior Loans Repaid ____ (Y, N, or NA)

Approved ____ Denied ____ Need More Information _____

Amount Approved \$ _____ Repayment Date _____

Loan Date _____

Approval _____ Date _____