Eastern Illinois University Student Services Building Charleston, Illinois 61920 217-581-5227

## **Emergency Student Loan Application**



(I.) PERSONAL INFORMAT	ION:						
FULL LEGAL NAME: LAST	FIRST	MIDD	LE INITIAL	SOCIAL SECURITY NUMBER			
LOCAL ADDRESS AT EIU	APT # CITY	STA	TE ZIP COI	DE TELEPHONE			
				( )			
				,			
YEAR IN SCHOOL:   Freshman	☐ Sophomore ☐ Junior ☐ S	enior Graduate	Graduate NUMBER OF SEMESTERS AT EIU:				
MAJOR:	ARE YOU A VETERAN?	□NO □YES	INTERNATIO	NAL STUDENT? ☐NO ☐YES			
(II.) LOAN REQUEST INFOR	RMATION:						
PURPOSE OF LOAN:							
AMOUNT YOU WISH TO BORROW: \$							
	+						
(III.) CO-SIGNER INFORMA	TION: All Emergency	Loan requests o	ver \$200 mus	st have a co-signer.			
NAME			RELATIONSHIP TO BORROWER				
ADDRESS	CITY	STAT	E ZIP COI	DE TELEPHONE			
				( )			
				, , ,			
(IV.) PARENT/SPOUSE INFO	DRMATION:						
NAME			RELATIONSHIP TO BORROWER				
		☐ Moth	er 🖵 Father	r 🗖 Spouse			
ADDRESS	CITY	STAT	E ZIP COI	DE TELEPHONE			
				( )			
				, ,			

## (V.) READ!! IMPORTANT INFORMATION:

I authorize Eastern Illinois University to deduct repayment for this loan and any interest, which might have accrued from any funds, which I may receive through The Office of Financial Aid whether or not the due date has been reached. The granting of this loan carries with it certain responsibilities. It is important that you repay the loan according to the agreed plan. If you have a repayment issue, please contact The Office of Financial Aid before your loan becomes due at 217-581-5227. Failure to make payment on your loan can result in a hold on some University services. Repayment of this loan will be made at the Cashier's Office in Old Main.

I hereby acknowledge the above information on this application is true and correct to the best of my knowledge. I will use the funds only for the purpose stated and agree to the terms of the loan. Before this loan check can be released, you must be currently enrolled, have a valid student identification card, and sign your promissory note.

## **HELPFUL HINTS:**

- 1) Answer all questions completely. If an incomplete or incorrect address is listed and correspondence associated with this loan application are returned, the additional cost of postage will be added to the loan amount.
- 2) Any loan amount over \$200 requires a co-signer. A co-signer must be a *FULL TIME EMPLOYED* person but <u>CANNOT</u> be another college student.
- 3) Any note requiring a co-signer will be mailed to the co-signer for completion unless the loan officer approves other arrangements. Loan checks *WILL NOT* be disbursed until the properly executed note has been returned.
- 4) Loan repayment dates will vary with different loan programs. Please consider a realistic, short repayment period before speaking with the loan officer. Please have a repayment date within ninety days in mind with the final date to be determined by the loan officer.

TO BE COMPLETED BY LOAN OFFICER									
APPROVED:	YES	NO	A	AMOUNT:	\$				
LOAN PROGRAM:									
CUM. HRS. EARNED:			Ī	OAN OFFIC	CER				
CUM. G.P.A.:									
CURRENT HRS:			I	<b>DUE DATE:</b>					
			(	CO-SIGNER	REQUIRED:	YES	NO		
PREVIOUS LOANS:			_						
	Paid on time: _		-						
	Late:		-						
	Hold:								
ACTIVE LOANS:									
SPECIAL NOTE:									