

Health Professions Student Loan

Personal & Confidential

Name		Social Security No.	Major
Local Address: Apt No.		Permanent Address: (if different)	
City/State/Zip		City/State/Zip	
Phone No.	Maiden Name	Phone No.	
Employer's Name		Employer's Phone No.	
Employer's Address		Employer's City/State/Zip	
Date of Birth	Anticipated Graduation Date	Clubs and Organizations	
Plans for the next 2 years		Other College you expect to attend	
Spouse's Name	Spouse's Social Security No.	Spouse's Work Phone No.	
Spouse's Employer	Address	City/State/Zip	
Student Loans Other than Perkins/NDSL			
		Direct \$	Others (Types) \$
Banks	City/State/Zip	Account No.	
Father, Stepfather or Guardian (Please Circle)	Phone No.	Employer	
Address		City/State/Zip	
Mother, Stepmother or Guardian (Please Circle)	Phone No.	Employer	
Address		City/State/Zip	
Two References From Home Locality Other Than Relatives or Students			
1. Name	Phone No.	Employer	
Address		City/State	Relationship
2. Name	Phone No.	Employer	
Address		City/State	Relationship
One Relative Other Than Parents Who Will Always Know Your Address			
1. Name	Phone No.	Employer	
Address		City/State	Relationship
2. Name	Phone No.	Employer	
Address		City/State	Relationship

I understand that:

- 1. I received a student loan and must repay my loan on a timely basis as called for in the repayment agreement, which was mutually agreed upon by me and my lending institution.
- 2. I must contact the lending institution prior to the due date, if any payment cannot be made for any reason.
- 3. I must inform my lending institution or billing agent immediately of any change in my name or address.
- 4. I must submit timely certification when requesting deferment, postponement, and/or cancellation benefits.
- 5. I may accelerate or make payments prior to the due date without penalty.
- 6. I may make payment in excess of the amount due. This can reduce the total amount of interest I will be required to pay over the life of my loan, but may not automatically apply to my next scheduled payment.
- 7. I may be eligible to defer, postpone and/or cancel repayment of my loan. The appropriate form to request any one of these privileges can be obtained from the lending institution or billing agent.
- 8. Provisions of my promissory note may require payment of my loan in minimum monthly (or quarterly) installments.
- 9. My loan may be subject to late charges if payments are past due depending on the provisions of my promissory note.
- 10. I may be required to pay the total cost of collection and/or litigation if my loan(s) becomes past due and remains past due without appropriate arrangements to bring it current.
- 11. Depending upon the promissory note provisions, I may be subject to being reported to a Credit Bureau if my loan(s) becomes past due.

I understand that I will be contacted during the next few months, with further information and instructions.

THE BORROWER ACKNOWLEDGES RECEIPT OF AN EXACT COPY OF THIS LOAN INTERVIEW.

Borrower
Signature _____

Date _____

Institution
Representative
Signature _____