OLYMPIC COLLEGE

PRIVATE LOAN REQUEST

2022-2023

Student LAST NAME   FIRST NAME   MI   ctcLink ID   For Official Use Only

This form is used to gather required data that will enable the Financial Aid Office to certify a private (non-federal) loan for students. Students borrowing private loans are required to complete the form.

Co-signer LAST NAME   FIRST NAME   MI   SSN

Co-signer Address

City   State   Zip   Phone Number

LOAN AMOUNT: What is the total amount you wish to borrow? _____ **(Required)**

Students can request loans up to the Cost of Attendance (COA) minus other aid. The requested loan amount may be reduced by the school to prevent exceeding COA (this is a requirement for education loan programs).

LOAN PERIOD: Please check below the terms for which you would like to request a loan **(Required):**

Terms you plan to attend and receive a loan:

Summer 2022	**Note:** The quarters you select will determine your beginning and ending loan period. The loan period includes the OC quarters you expect to receive a loan check for, under this loan application.
Fall 2022	
Winter 2023	**Note:** *The quarters you check MUST be consecutive.*
Spring 2023	*For example,* if you want the loan to produce a check over three quarters starting in the Fall then check the boxes for Fall, Winter, and Spring.

Where will you live during the loan period? (Required)   On-Campus   Off-Campus   With Parents

LENDER NAME: Please write your lender's name and contact i.e., phone, website etc. **(Required):**
_____
_____

By signing below, I certify that the information I have provided is true and correct. I understand that I may be eligible for the Federal Direct Subsidized or Unsubsidized loan based on federal guidelines, if I am interested. I also certify that all the information I have provided is true and correct and all credit check and pre-approval will be done by a lender of my choosing.

Student Signature: _____ **Date:** _____

Office use only		
	Scanned	**Posted**
Received		Code: J3
		Form last updated: JUL22FM
MPN: □Yes □No | Counseling: □Yes □No	Completed by:_____	Date:_____