
Applicant

Account Number

Application for Student Loan

Leroy Springs Student Loan Program



168 Skipper Street
Fort Mill SC 29715

Confidential

For use of Loan Committee only

This application covers one year only

Personal Data

Full Name _____

Social Security No. _____ Telephone _____

Address _____

City _____ State _____ Zip _____

Email _____

Date of birth _____ Male _____ Female _____

Father's (or Guardian's) name: _____ SS # _____

Telephone _____ Address _____

City _____ State _____ Zip _____ Email _____

Occupation _____ Employed by _____

How long employed? _____ Annual earnings _____

Address & phone no. _____

Mother's (or Guardian's) name: _____ SS # _____

Telephone _____ Address _____

City _____ State _____ Zip _____ Email _____

Occupation _____ Employed by _____

How long employed? _____ Annual earnings _____

Address & phone no. _____

Number of dependent children of parents _____ Number presently in college, including applicant _____

Number in grade school _____ Number in high school _____

Did you work during last summer vacation? _____ If Yes, where? Company _____

City _____ State _____

If No, how did you spend summer? _____

Do you plan to work this summer? Yes _____ No _____ Where _____

Do you plan to work while at school? Yes _____ No _____ Where _____

Occupation _____ Expected Annual Earnings _____

High School attended _____

Month and year of graduation _____

Have you taken Scholastic Aptitude Test? Yes _____ No _____ If yes, where? _____

College and Course of Study

What college or colleges have you applied to for admission? _____

Have you been accepted for admission? Yes _____ No _____ If yes, where? _____

For school term beginning _____ Final choice of college _____

What is your expected course of study? _____ Year you expect to graduate from college _____

Check class for which you will be registering: Freshman _____ Sophomore _____ Junior _____ Senior _____

Have you investigated to see what scholarship aid may be available to you at the college you have chosen to attend? Yes _____ No _____

Have you completed and mailed family need analysis form (FAFSA)? Yes _____ No _____

Have you applied for other scholarship or loan? Yes _____ No _____ If yes, to whom _____
and what is the status of your application? _____

Financial Data

If you have attended college before, did you receive financial aid from any scholarship or loan program? Yes _____ No _____

If yes, describe program _____

How many previous loans have you received through the Leroy Springs Student Loan Program? _____
(One school year or portion of year is considered to be one loan.)

Estimated college expenses will be \$ _____ Per semester Per year (Check one)

List estimated funds available to you from:

Parents or relatives \$ _____ Per semester Per year (Check one)

Funds you have or expect to earn at college \$ _____ Per semester Per year (Check one)

Other financial aid (if known)..... \$ _____ Per semester Per year (Check one)

Show here the balance (not available from above sources) you wish to secure from Leroy Springs Student Loan Program:

\$ _____ Per semester Per year (Check one)

If you wish to receive optional book allowance, please enter amount \$ _____ Per semester Per year (Check one)

Condition of Loan

If a student loan is granted, will you agree to sign a promissory note for the amount of the loan? Yes _____ No _____

Are your parents willing to endorse your note? Yes _____ No _____

If loan is made to me: (Please initial each line)

I agree to notify The Springs Close Foundation within one month of my withdrawal or graduation from college. _____

I agree to begin to make repayment in monthly installments. _____

I agree to repay the total amount loaned me within the following time limits. _____

One loan, in 48 months; Two loans, in 60 months; Three loans, in 72 months; or Four loans, in 84 months.

I understand that no interest will be due if repayment is made in monthly installments, beginning six months after I graduate, withdraw from college, or drop below full-time status, and total amount is repaid within the time limits agreed to above. _____

I agree to pay a \$20.00 late fee for any payment not received within thirty days of its due date. _____

Signature _____

Date _____

Interviewer's Recommendations

Name _____

Address _____ City _____ State _____ Zip _____

Has applied for 1st _____ 2nd _____ 3rd _____ 4th _____ student loan to attend _____

to study _____

and was interviewed by: _____

We have reviewed applicant's high school record _____ (or) previous year's college record _____

and found it to be satisfactory _____ unsatisfactory _____

Total basic cost to applicant for school year will be \$ _____

Amount of loan requested \$ _____

Amount recommended \$ _____

Book Allowance \$ _____

Action of Student Loan Committee

Total Approved \$ _____

For Office Use Only

(This is for use of The Springs Close Foundation general office)

	1st Payment	2nd Payment	Total Payment
Date due:			
Book Allowance			
Amount The Springs Close Foundation will pay:			