

Student Name _____

Social Security Number _____

TRUMAN STATE UNIVERSITY FOUNDATION
CULTURAL LOAN APPLICATION

Applicant Information

Local Address: _____ Local Phone: _____

Home Address: _____
Street or Route

City _____ State _____ Zip _____

Home Phone: _____

If student is married, please provide the following information:

Spouse's Name _____ Occupation: _____

Outstanding Debt

Have you borrowed funds through the Truman State University Foundation before?

Yes _____ No _____ If yes, when? _____ How much? \$ _____

Total amount of debt outstanding \$ _____

Please list type and amounts, including educational loans as well as car loans, etc.

TYPE OF DEBT	AMOUNT
_____	\$ _____
_____	\$ _____
_____	\$ _____

Employment History

Are you currently employed? Yes _____ No _____ If yes, provide the following information:

Employer's Name: _____

Employer's Address: _____

Employer's Phone: _____ Monthly Net Earnings: \$ _____

Educational Background

Major: _____ Cumulative GPA: _____

Truman Hours Earned: _____ Total Hours Earned: _____

Expected Truman Graduation Date: _____

Plans after leaving Truman: _____

References

Please list two personal references with whom you will keep in contact in the future. (Please do not include parents or anyone who resides at the same address as the parents. If you choose to use a Truman employee, only one may be used. Students can not be used.)

Name: _____ Telephone: _____

Address: _____
Street or Route

City State Zip

Occupation: _____ Relationship to Student: _____

Name: _____ Telephone: _____

Address: _____
Street or Route

City State Zip

Occupation: _____ Relationship to Student: _____

Please provide two credit references (for example banks, credit card companies, utility companies, etc.)

Name: _____ Telephone: _____

Address: _____
Street or Route

City State Zip

Type of Credit: _____

Name: _____ Telephone: _____

Address: _____
Street or Route

City State Zip

Type of Credit: _____

Repayment

If you are married, has your spouse agreed to co-sign the promissory note? Yes _____ No _____

Have your parents (including married applicants) agreed to guarantee payment of this loan? Yes _____ No _____
(Please note that per Foundation guidelines both parents or another person acceptable to the Foundation must guarantee payment even if the student is considered independent for Financial Aid purposes.)

Please describe specifically your plans for repayment: _____

Co-Signer's Information

Please provide the following information for the parents who have agreed to co-sign this loan (two required).

Name: _____ Telephone: _____

Parent #1 Address (if different from home address): _____

_____ City State Zip

Parent #1 Occupation: _____ Relationship to Student: _____

Marital Status: Married _____ Single _____ Social Security Number _____

Parent #2 Name: _____ Telephone: _____
(Spouse of Parent #1 or other single parent)

Parent #2 Address (if different from home address): _____

_____ City State Zip

Parent #2 Occupation: _____ Relationship to Student: _____

Social Security Number _____

Eligibility

The cultural loan program will fund up to \$5,000 or the cost of the trip (whichever is lower) of an approved study abroad trip. Truman sponsored trips are given top priority for funding.

Requested amount of cultural loan: \$ _____

Requested disbursement date: _____

The information included on this application is true and correct to the best of my knowledge.

Signature of Applicant

Date

Please submit the completed application to the Financial Aid Office.

FUNDS ARE RELEASED TO THE STUDENT ONLY AFTER PROGRAM COSTS ARE PAID.

Do not write in this section

Committee Decision:

Loan Amount \$ _____ Distribution date(s) _____

If denied, reason _____

Printed Name: _____

SSN: _____

Amount: _____

Semester Awarded: _____

Loan Type: _____