
Applicant

Account Number

Application for Student Loan

Leroy Springs Student Loan Program



951 Market Street Suite 205
Fort Mill, SC 29708
Phone: 803.548.2002

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:			