



**APPLICATION AND PROMISSORY NOTE**

H.H. Peters Loan Fund and UWS Short-Term Loan

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP code: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Program: \_\_\_\_\_

Amount requested: \_\_\_\_\_ (US Dollars) Disbursement method:  Check  Direct Deposit\*

*\*With an active direct deposit on file, funds will be available within 2 business days after approval*

Service fee: \$30 (US Dollars)

Type of emergency loan:  H.H. Peters Loan Fund  UWS Short-Term Loan

Nature of emergency / Purpose of the loan: \_\_\_\_\_

Repayment information:  Financial aid  Work  Other. If other, please specify \_\_\_\_\_

**Applications must be submitted and approved by 12 p.m. to disperse funds the following day.**

All emergency loans must be paid in full prior to 60 days from the issuance date or by June 30<sup>th</sup> or by the end of the final term at the university, whichever occurs first. I understand that any loan not repaid on a timely basis is considered a past due account and is subject to university policy regarding past due student accounts.

I certify that this loan is requested for the above stated purpose.

I acknowledge that a past due loan account may be subject to collection actions in accordance with the university policies and procedures. I agree that I am responsible for all outstanding charges to the university, including, but not limited to, the collection agency and other fees incurred to collect a past due account.

I have read and understand [Policy 3801 Emergency Student Loans](#) and the provisions stated above.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

<b>UWS use only:</b>	Cumulative GPA verification (above 2.0): _____
Approved <input type="checkbox"/> Denied <input type="checkbox"/>	H.H. Peters Emergency Loan Amount _____ UWS Short-Term Loan Amount _____
Financial Aid Office Signature _____	Date _____
Check # _____	Check Date: _____