

JESSIE GRISWOLD TRUST  
RONNIE HETELLE, TRUSTEE  
APPLICATION FOR LOAN

Name \_\_\_\_\_ Date \_\_\_\_\_  
Phone for Direct Contact \_\_\_\_\_ Parent's Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_  
His Address \_\_\_\_\_ State if living \_\_\_\_\_  
Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_  
Her Address \_\_\_\_\_ State if living \_\_\_\_\_  
Give names and ages of all brothers and sisters \_\_\_\_\_

List in chronological order all schools you have attended: \_\_\_\_\_ Inclusive Dates: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all honors, prizes and scholarships received while in school: \_\_\_\_\_  
\_\_\_\_\_

If you have been in military service, list branches and dates: \_\_\_\_\_  
\_\_\_\_\_

What College, University or School do you plan to attend? \_\_\_\_\_  
\_\_\_\_\_

What course of study do you plan to pursue? \_\_\_\_\_

How many years required to complete your work? \_\_\_\_\_

Have you been accepted for admission? \_\_\_\_\_

Have you any chronic ailment requiring special treatment? \_\_\_\_\_

If so, explain \_\_\_\_\_

Must you contribute to the support of anyone other than yourself? \_\_\_\_\_

If so, explain \_\_\_\_\_

Estimate below you budget for Academic Year 20\_\_\_\_ to 20\_\_\_\_:

RECEIPTS

From Parents \$ \_\_\_\_\_  
From Other Relatives \$ \_\_\_\_\_  
From Savings \$ \_\_\_\_\_  
From Employment \$ \_\_\_\_\_  
Loan-Indicate Source \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
Other sources \$ \_\_\_\_\_  
  
TOTAL \$ \_\_\_\_\_

EXPENSES

Tuition \$ \_\_\_\_\_  
Other fees \$ \_\_\_\_\_  
Books & Supplies \$ \_\_\_\_\_  
Board & Room \$ \_\_\_\_\_  
Clothing \$ \_\_\_\_\_  
Medical \$ \_\_\_\_\_  
Recreation \$ \_\_\_\_\_  
Incidentals \$ \_\_\_\_\_  
  
TOTAL \$ \_\_\_\_\_

Do you understand that you will be expected to repay in a timely fashion at least 50% of any loan granted to you?

\_\_\_\_\_

Do you understand you must sign a note evidencing your indebtedness to the Trust? \_\_\_\_\_

Are you willing to sign a note evidencing your indebtedness to the trust? \_\_\_\_\_

Repayment shall begin one year after graduation.

Do you understand that loans to you in succeeding years will depend upon your continuance of schooling? \_\_\_\_\_

\_\_\_\_\_

List the names, addresses and occupations of persons, other than relatives, who are sufficiently acquainted with you and your family to speak from personal knowledge of your financial condition and that of your family:

<u>Name</u>	<u>Occupation</u>	<u>Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

A BRIEF WRITTEN STATEMENT OF NEED IS REQUIRED WITH THIS APPLICATION. YOU MAY WRITE IT ON A SEPARATE PIECE OF PAPER OR WRITE IT ON THE BACK OF THIS APPLICATION.

IMPORTANT: IT IS NECESSARY THAT YOU SUBMIT WITH THIS APPLICATION A TRANSCRIPT OF YOUR HIGH SCHOOL CREDITS AND ALL COLLEGE WORK COMPLETED.

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

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Parent's or Guardian's Signature  
(Required if student under age of 18)