

MACALESTER COLLEGE PERKINS LOAN
APPLICATION

Federal guidelines require completion of this application. You must complete and **return this application to the Financial Aid Office** to be eligible to receive your Macalester College Federal Perkins Loan. The purpose of requesting this information is to assist Macalester College in the College's due diligence of recovering outstanding loan debts. If at any time you default on your loan payments, the Macalester College Loan and Collections Office will submit this information to an outside collection agency.

Please print legibly – COMPLETE ALL INFORMATION

BORROWER INFORMATION:

Name: _____
Last First Middle

Date of Birth: ____/____/____ Sex: (Male) (Female) Social Security Number: ____/____/____
mm dd yyyy Circle one xxx xx xxxx

Drivers License Number: _____ State of Issuance: _____

Year in College: (FR) (SO) (JR) (SR) Anticipated Graduation Date: ____/____/____
Circle one mm yyyy

CURRENT ADDRESS:

PERMANENT ADDRESS:

Address Line 1: _____
Address Line 2: _____
City, State: _____
Zip Code: _____
Home Phone: _____
Cell Phone: _____
Email Address (if different from your Macalester email address): _____

Outstanding Federal Perkins Loan From Other College/University:

(College/University) (Amount Borrowed) (Date Received)

REFERENCE INFORMATION:

FATHER/GUARDIAN:

MOTHER/GUARDIAN:

Name: _____
Address Line 1: _____
Address Line 2: _____
City, State, Zip Code: _____
Home Phone: _____
Cell Phone: _____
Email Address: _____
Employer's Name: _____
Emplr City/ST/Phone: _____

List two (2) references other than parent/guardian who will always know your address:

Name: _____
Relationship: _____
Address Line 1: _____
Address Line 2: _____
City, State, Zip: _____
Home Phone: _____
Cell Phone: _____
Email Address: _____

I attest that this information is true to the best of my knowledge, and that there is no intent to defraud or misinform.

Signature

Date