

## **Short-Term Loan Application**

Students who are currently enrolled at TTUHSC El Paso may apply for a short-term loan to help with expenses such as books, supplies, or other necessities to attend school. Please read this information carefully and submit a signed copy with your short term loan application.

- Approval for a short term loan is based on the availability of funds at the time the application is received.
- Students who currently owe a past due balance on a previous short term loan must pay
  their past due balance in full before applying for a short term loan.
- Students may not apply for a short term loan less than 30 days prior to graduation.
- In order to be considered, this loan application must be filled out completely, including the reference information and how the loan will be repaid.
- Failure to repay a short term loan by the due date will result in a hold being placed on your record. This hold could prevent class registration, transcript requests, and release of your diploma.
- This short term loan is not considered financial aid. If you wish to apply for financial aid please submit the Free Application for Federal Student Aid (FAFSA) at www.FAFSA.ed.gov.
- Any excess Title IV funds disbursed to your account will be used to pay off this loan regardless of the loan due date. By signing this agreement, you are authorizing TTUHSC El Paso to apply your Title IV funds to your short-term loan.

| By signing below I agree that I have read and u | understand the inform | nation stated abo | ove.                                       |
|---|-----------------------|-------------------|--|
| Student Signature                               | Student ID Number     | Date Signed       | Page <b>1</b> of <b>3</b><br>Rev. May 2024 |



## Short Term Loan Application

| Student Information         |                                |                     |                          |                  |  |
|-----------------------------|--------------------------------|---------------------|--------------------------|------------------|--|
| = 11.11                     |                                |                     |                          |                  |  |
| Full Name:                  |                                | First               |                          | M.I              |  |
| Address:Street Add          | ress                           |                     |                          | Apartment/Unit # |  |
|                             |                                |                     |                          | ,                |  |
| City                        |                                | State               | su with a Na year la com | Zip Code         |  |
|                             |                                |                     |                          |                  |  |
| Birth Date:                 | Marital Status:                | Spouse              | e's Name:                | <del></del>      |  |
| Spouse's Employer:          |                                | Spous               | se's Work Phone: ()      |                  |  |
|                             | Re                             | ference Information |                          |                  |  |
|                             |                                |                     |                          |                  |  |
| Full Name:                  |                                | First               |                          | M.I              |  |
| Address:                    |                                |                     |                          |                  |  |
| Street Add                  | ress                           |                     |                          | Apartment/Unit # |  |
| City                        |                                | State               |                          | Zip Code         |  |
| Home Phone: ()              | Alterr                         | nate Phone: ()      |                          |                  |  |
|                             |                                | Loan Information    |                          |                  |  |
| May Amounta, CSBS/Ma        | dicine \$1,500; Nursing \$500  |                     | Amount Doguested         |                  |  |
|                             |                                | NAVI 4 1914 I       | Amount Requested:        |                  |  |
|                             | e) 30 Days / 60 Days / 90 Days |                     | tor?                     |                  |  |
| How will you repay the loar | n?                             |                     |                          |                  |  |
| Student Signature:          |                                |                     | Date:                    |                  |  |
|                             |                                | For Office Use      |                          |                  |  |
|                             |                                |                     |                          |                  |  |
| Considered By:              | Approved Date:                 | Amount: _           | Voucher#                 | <b>#</b> :       |  |
| STL Due Date:               | Terms:                         | %:                  | Prom Note Due Date:      |                  |  |
| Loan Fund & Account         | <b>:</b>                       |                     |                          |                  |  |
| Comments:                   |                                |                     |                          |                  |  |



Please return your application to the Financial Aid Office via:

Mail: TTUHSC El Paso Office of Financial Aid

130 Rick Francis MSC 21014

El Paso, TX 79905

Email: elp.financialaid@ttuhsc.edu

Fax: 915-783-5145