Graduate Student Senate Short-Term Emergency Loan Request Form

Please read the attached Loan Criteria before completing this form.

- 1. Provide a valid mailing address, email address, and phone number so that the Graduate Student Senate can contact you upon approval of your loan application.
- 2. When you have completed this form, return it to the Graduate Student Senate (Student Union, Room 213). If the office is closed, you may slide it under the door or fax the completed form to (860) 486-0203.
- 3. Keep a copy of the Loan Criteria for your records.

Please provide all of the following information – Incomplete forms will not be processed:

Last Name	First Name	M. I.
PeopleSoft ID Number:		
Campus Mailing Address (U-I	Box No., Department where yo	ou can receive mail):
Date of Request:	Expecte	d Graduation Date:
Full Mailing Address:		
Telephone Number: (Home) _	(V	Vork)
Email Address:		
Amount Requested (not to exc	eed \$1,500.00):	
Please describe your emergend	ey (MUST BE SPECIFIC):	
From what source of funding a	are you planning to repay this	loan? (MUST BE SPECIFIC)
How did you hear about this lo	oan fund?	
I have read the Loan Criteria, the terms of agreement.	believe that I am eligible for	a short-term loan, and agree to abide by
	Signature	Date

For Office Use Only:		
Date Processed:	Circle One: Approved <i>OR</i> Denied	Due Date:
Approved Amount:	Reason for Denial:	
		Last updated: September 10, 2014