SLM Financial Corporation *SLM Financial

Borrower's Signature





Fax Applications to: 1-317-806-4871 Call With Questions: 1-888-272-5543 Mail Applications To: SLM Financial Corporation PO Box 470 Marlton, NJ 08053

Instructions: If all information is not completed in full, the processing of your application may be delayed. Initial any changes; do not use correction fluid. Bring to your school's financial aid office for school certification. This application must be completely filled out and certified by the school official. By submitting this application, you authorize SLM Financial to check your credit history whether or not your application is signed. IMPORTANT INFORMATION ABOUT PROCEDURES FOR APPLYING FOR A STUDENT LOAN: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and

date of birth, and other information							ve will ask you for your name, addi locuments.	ress,
Section A: Borrower Section:		tion in this section. Must be a						
Loan Amount Requested:		Repayment Term (years): Inte	Interest Only Payments? (In Scho			Deferred Payments?(12 Month Max-In Scho	ol Only)
Tuition +Expenses \$	=Total \$		Ye		# Months		Yes No # Months	
Last Full	First	MI Jr. / Sr.		Social Securit	ty Number	Drivers Lic	cense Number	_
Name:	4 / II/D 1	D		(CD: 4 (4/1 /	DI GI	10	
Street Address	Apt#/Rural	Koute	L	ate of Birth (m	onth/day/year)	Please Sele		
City	State Zip Code Ho	w Long at Current Address	Own	Rent	Live with Parents	U.S. Citize Home Pho		
	, , , , , , , , , , , , , , , , , , , ,	Years Months				(1	
Mailing Address if different from Street Address abo	ove Landlord / I	Mortgage Holder Name & Pho	ne#	L	Email Address)	
Monthly Mortgage / Rent Amount	Approximate Balance (Mortgage only)		Approxim	ate Home Value	e (If you own)	Work Pho	ne	
S Employer Nome	\$ Position / Title	How Long	\$	Other Incor	ma Carreage	() Note: Voy do not have to reveal aliment	ahild
Employer Name	Position / Title	•		Other Incor	ne <u>Source</u> :		Note: You do not have to reveal alimony, support or maintenance income unless you	ı wish
Employer Address	State Zip C	Years Code Gross Annual Salary	Months	\$ Previous Er	mployment Information:		it to be considered as a basis for loan repar	yment.
•	r	s		Employer:			How Long: years	months
Reference Name (Do not use co-borrower.)	Reference's Permanent Address:	1 *		- гирюуст.	Reference's Home Ph	none	Relationship years	
Defense News (Dense)	D.C.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Defense ' II - 2'		Deletional."	
Reference Name (Do not use co-borrower.)	Reference's Permanent Address:				Reference's Home Ph	none	Relationship	
Section B: Co – Borrower Section	Please complete all informat	tion in this section if anniving	iointly Must	hea U.S. Citiz	en or Permanent Resid	lent Alien		
Relationship to Borrower: Last	First	лон ли ино эссион и аррушу	MI	Jr. / Sr.	Social Security Numb		Drivers License Number	
Street Address	Apt #/Rural	Route	D	ate of Birth (m	onth/day/year)	Please Sele	ect One:	
C.	Trat In			La	Tree cars	U.S. Citize		
City	State Zip Code Ho	w Long at Current Address	Own	Rent	Live with Parents	Home Pho	ne	
Mailing Address if different from Street Address abo	nve Landlord / I	Years Months Mortgage Holder Name & Pho	ne#		Email Address	()	
	- Landord / L	riongage riotaer rame ee riio			Email Fiduless			
Monthly Mortgage / Rent Amount	Approximate Balance (Mortgage only)		Approxim	ate Home Value	e (If you own)	Work Pho	ne	
\$	\$		\$			()	
Employer Name	Position / Title	How Long		Other Incor	ne <u>Source</u> :		Note: You do not have to reveal alimony, support or maintenance income unless you	
	7.0	Years	Months	\$			it to be considered as a basis for loan repay	
Employer Address	State Zip C			Previous Er	mployment Information:			
Section C: Student Section:	Please complete all informat	\$ sion		Employer:			How Long: years	months
Relationship to Borrower: Last	First	ion.	MI	Jr. / Sr.	Social Security Numb	per	Date of Birth (month/day/year)	
Section D: School Section:								
School Code – Branch Code	School Name	DIDECT	T A 1				Cost of Attendance = Tuition + Expenses	
600860		DIRECT	LUA				\$	
School Phone Number	School Address					-	Authorized First Disbursement Date (Month/Day/	Year)
						1	Class Dates - Start/End (Month/Day/Year)	· <u></u>
							Start End	
						[4	Anticipated Graduation Date(Month/Day/Year)	
	Proof of En	rollment-	Requi	red E	or Fund:	ing		
Evidence of Er	nrollment must accompany						closure Statement)	
		t Enrollment Agre					,	
This application will be submitted to SL connection with this application. I/we au inquiries and agree that such information be a true representation as to the facts.	thorize and instruct any person or n, along with this application, shall	consumer reporting ag l remain SLM's proper	gency to fu ty, wheth	rnish to SL er or not a lo	M any information oan is approved. A	n that it ma Il informat	ay have or obtain in response to such tion set forth in this application is dec	credit clared to
be a true representation as to the facts, mobile the second containing this loan, I/we authorize and containing this loan, I/we authorize and containing the second containing t								
agents to share and release information p	pertinent to this application or loan	n. In addition, SLM an	d its affilia	ites may sha	are credit and other	r informati	ion about you with each other for man	
and administrative purposes. (Please rev								

Date

Co- Borrower's Signature

Date

SLM Financial Corporation

a **Sallie Mae** Company

Presents the

Career Training Loan

Easy to Apply
Affordable Payments
Fast Approval Process
Interest Rates Tied to Prime

Please Follow the Instructions Below

Instructions For Completing the Loan Application (see reverse):

The loan application should be completed by typing or printing in black ink. If corrections are necessary, cross out the incorrect information, and type or write the correct information. Please initial all corrections. Do not use correction fluid.

BORROWER:

• Complete the Borrower sections on the application (Sections A and C). Application must be completely filled out to process including Gross Annual Salary.

CO-BORROWER (if applicable):

• Complete the Co-Borrower section on the application (Section B). Application must be completely filled out to process including Gross Annual Salary.

Borrower and Co-borrower (if applicable) must provide a signature at the bottom of the application.

Fax the application to 1-317-806-4871 or Mail the application to:

SLM Financial Corporation P.O. Box 470 Marlton, NJ 08053-0470



For Assistance Call Toll-Free: 1-888-272-5543

Visit www.slmfinancial.com for more information.