



UNIVERSITY OF SAN DIEGO SCHOOL OF LAW
TUITION CREDIT LOAN CONTRACT
BORROWER DATA SECTION

PLEASE PRINT ALL INFORMATION (MUST BE COMPLETED IN FULL):

1. BORROWER'S FULL NAME LAST FIRST MIDDLE
FORMER NAMES USED:
2. ADDRESS WHILE AT SCHOOL NUMBER AND STREET CITY STATE ZIP
PHONE # () E-MAIL ADDRESS
3. PERMANENT ADDRESS NUMBER AND STREET CITY STATE ZIP
PHONE # ()
4. USD ID SSN # DRIVER'S LIC# STATE
5. DRIVER'S LIC# STATE
6. COLLEGE OR UNIVERSITY FROM WHICH YOU GRADUATED:
7. DATE OF BIRTH PLACE OF BIRTH
8. ARE YOU A VETERAN/ACTIVE MEMBER OF THE ARMED FORCES OF THE USA? YES NO
9. BORROWER'S MOTHER AND FATHER PARENT'S FULL ADDRESS NUMBER AND STREET CITY STATE ZIP
PHONE # ()
10. NAME OF CURRENT EMPLOYER FULL ADDRESS WORK PHONE ()
11. BORROWER'S MARITAL STATUS SINGLE MARRIED WIDOWED DIVORCED
12. IF MARRIED, SPOUSE'S NAME SPOUSE'S EMPLOYER SPOUSE'S EMPLOYER ADDRESS
13. SPOUSE'S MOTHER AND FATHER ADDRESS PHONE ()
14. THREE (3) RELATIVES (NOT PARENTS) WHO WILL ALWAYS KNOW YOUR ADDRESS (MUST BE (3) DIFFERENT ADDRESSES): NAME PHONE () FULL ADDRESS NUMBER AND STREET CITY STATE ZIP NAME PHONE () FULL ADDRESS NUMBER AND STREET CITY STATE ZIP NAME PHONE () FULL ADDRESS NUMBER AND STREET CITY STATE ZIP
15. FRATERNAL, PROFESSIONAL OR OTHER ORGANIZATIONAL MEMBERSHIPS
16. EXPECTED DATE OF GRADUATION FROM USD
17. YEAR IN SCHOOL (JUNIOR, SENIOR, ETC.)
18. FUTURE PLANS (AFTER GRADUATION)
19. PRIOR FEDERAL PERKINS LOANS OR NDSL: NO YES IF YES, DATES
20. HAVE YOU EVER DEFAULTED ON ANY PRIOR EDUCATIONAL LOAN? NO YES IF YES, EXPLAIN
21. HAVE YOU EVER HAD AN EDUCATIONAL LOAN DISCHARGED THROUGH BANKRUPTCY? NO YES IF YES, EXPLAIN

- I understand I must go to Loan and Student Account Resolution Department to sign the promissory note. I also understand that NO ADDITIONAL NOTICES will be sent to me.
I understand that this loan will be reported to a credit bureau on a monthly basis.
I authorize my credit records to be made accessible to the University of San Diego (USD) in the administration and collection of this loan.
I authorize USD to contact any past, present, or future creditor or employer regarding my account status, employment history, and any other information regarding my name, address and/or telephone information, should such procedures be deemed necessary by USD.
I authorize USD to contact any school which I may attend, to obtain information concerning my student status, my year of study, dates of attendance, graduation, withdrawal, transfer, or my current address.

SIGNATURE OF STUDENT

DATE

UNIVERSITY OF SAN DIEGO SCHOOL OF LAW
TUITION CREDIT LOAN
ENTRANCE INTERVIEW

NAME _____ USD ID# _____ SOCIAL SECURITY # _____

A student loan is a serious legal obligation. It is extremely important that you understand your rights and responsibilities; when signed, this statement indicates that you understand your rights and responsibilities, and you agree to honor them:

1. I understand that I must, without exception, report any of the following changes to:
USD Loan and Student Account Resolution Department, Hughes Administration Center – Room 209, 5998 Alcala Park, San Diego, CA 92110-2492, (619) 260-4130.
 - a. If I withdraw from school
 - b. If I transfer to another school
 - c. If I drop below half-time status (6 credits per semester)
 - d. If my name should change
 - e. If my local or permanent address changes
2. I understand that I must conduct an Exit Interview with the Loan and Student Account Resolution Department when I graduate or withdraw from the University of San Diego, School of Law; failure to satisfactorily complete an Exit Interview may result in the retention of my academic records and/or diploma.
3. I understand that the repayment period begins twelve (12) months from the time I cease to be enrolled at the University of San Diego, School of Law, as a half-time student.
4. I understand that the minimum payment will be \$30 per quarter, and that it may be more in order to repay the total amount borrowed plus interest within the 10 year repayment period.
5. I understand that the annual percentage rate of five percent (5%) will begin to accrue on the unpaid balance, after the twelve (12) month grace period following the time that I cease to be considered at least a half-time student.
6. I understand that if I return to an institution of higher education as at least a half-time student, I may request that the payments on my USD – Tuition Credit Loan may be deferred. I further understand that it is my responsibility to request the necessary form(s), to have said form(s) completed and certified by the required official, and return the form(s) to the Loan and Student Account Resolution Department at USD.
7. I understand that if I fail to repay the loan as agreed, the total loan may become due and payable immediately and legal action could be taken against me and that I will be liable for collection and/or litigation costs.
8. I understand that I must promptly answer any communication from the Loan and Student Account Resolution Department at USD with respect to this loan.
9. I understand that there is no penalty for prepayment. I further understand that subsequent interest charges may be reduced by such prepayments.
10. I understand that if I cannot make any payment on time, I must contact the Loan and Student Account Resolution Department as soon as possible, and that I will be subject to late charges as specified on the Promissory Note.
11. I authorize USD Loan and Student Account Resolution Department to contact any school which I may attend to obtain information concerning my student status, my year of study, my dates of attendance, graduation, withdrawal, my transfer to another school, or my current address.
12. This loan will be reported to a credit reporting bureau on a monthly basis, and if in default, this may have a negative effect on my credit rating.

I CERTIFY THAT I HAVE READ AND UNDERSTAND MY RIGHTS AND RESPONSIBILITIES AND THAT I WILL COMPLY WITH ALL THE REQUIREMENTS OF THIS LOAN. I HAVE RECEIVED A COPY OF THE TUITION CREDIT LOAN ENTRANCE INTERVIEW.

Student Signature _____ Date _____