

Southwestern University
Summer Loan Program

REQUEST FORM

(Return Completed Form to Human Resources Office for Processing)

Employee's Full Name: _____

Employee's Address: _____

Employee ID #: _____ Phone Number : _____

Loan Amount Requested: \$ _____
(maximum \$300.00)

Are you paid: Monthly _____ Bi-Weekly _____

Repayment Schedule: Regular pay periods beginning September 1, 2018 and ending
December 31, 2018.

I, _____ understand that I will be required to complete a
(print name)
Loan Program Promissory Note and Security Agreement (Agreement) and that the loan will
not be issued until this Agreement has been completed.

Employee's Signature

Date

FOR HUMAN RESOURCES OFFICE USE ONLY:

Eligibility Verification:

Renee Maule

Date

Human Resources Information Systems Analyst

Check Received by Employee: _____ Date: _____