

**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 : _____

Are you paid: Monthly _____ Bi-Weekly _____

I wish to receive loan payment via: Paper Check _____ Direct Deposit * _____

** If Direct Deposit is selected, you will receive additional information from
the Business office to complete this process.*

Repayment Schedule: Regular pay periods beginning September 1, 2019 and ending
December 31, 2019.

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
Human Resources Representative

Date

Check Received by Employee: _____ Date: _____

Direct Deposit submitted by Business Office on Date: _____