



Emergency Loan Request Form

Student Name: _____ Social Security #: _____

Campus address and phone: _____

Email address: _____

Home address: _____

Program: _____ School: _____

Month/Year accepted into program: _____ Degree sought: _____

Signature of GSA representative: _____ Date: _____

Loan amount requested: \$ _____ (up to \$250)

The student has up to one month the repay the loan.

I, _____, agree to repay \$ _____ to the GSA by _____.
(print name) (loan amount) (date of repayment)

Signature of Graduate Student: _____ Date: _____

Signature of GSA treasurer: _____ Date: _____

For GSA use only _____

GSA check # _____

Date of repayment _____

Type of repayment: CASH Check (if check, # _____)