

2019-20 Private Loan Supplemental Form

Student Status: ☐ School of Dentistry ☐ UCLA Extension ☐ Coding Boot Camp at UCLA Extension ☐ Intensive Data Science Camp

This form is required for all students applying for a private loan. Complete and return this form with a clear copy of your photo ID (e.g. Driver's License, Passport, ID issued by the Department of Motor Vehicles).

UCLA Extension does not defer fees. Students must pay enrollment fees at the time of registration. Students are responsible for adhering to Registration/enrollment, drop and refund policies as published on the UCLA Extension website. Please note: If you're applying for a private loan, you must enroll and pay for at least 6 units out-of-pocket before UCLA Extension can disburse any funds to you.

Last Name: _____ First Name: _____ MI: _____

Address Number & Street: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ - _____ - _____ Birth Date (MM/DD/YYYY): _____

Daytime Telephone Number: _____ Email: _____

Are you applying for a private loan using the lender's online application: ☐ Yes ☐ No

Name of Lender: _____ Quarterly Loan Amount Requested: \$ _____

Note: Quarterly loan amount may not exceed the quarterly cost of attendance.

Citizenship/Residency Status:

Are you a U.S. citizen? ☐ Yes ☐ No

If you answered "No," check the appropriate box to indicate your status:

- | | | |
|---|----------------------------------|--|
| <input type="checkbox"/> Permanent Resident | <input type="checkbox"/> Refugee | <input type="checkbox"/> International Student |
| <input type="checkbox"/> Asylee | <input type="checkbox"/> Amnesty | <input type="checkbox"/> I-668a |

Attach a copy of your green card or documentation to verify this status (I-151, I551, I-94, etc.)

Certificate Title: _____

Number of units you expect to take each quarter:

_____ Summer 2019 _____ Fall 2019 _____ Winter 2020 _____ Spring 2020

Enrollment Loan Period: From _____ To _____
(Month/Year) (Month/Year)

Have you ever received financial aid while attending UCLA: ☐ Yes ☐ No Or UCLA Extension: ☐ Yes ☐ No

Education History:

Circle last year completed: HIGH SCHOOL 10 11 12 COLLEGE 1 2 3 4

College Name	Dates	Degree	Financial Aid
_____			<input type="checkbox"/> Yes <input type="checkbox"/> No
_____			<input type="checkbox"/> Yes <input type="checkbox"/> No

I certify that all information on this form is true and correct to the best of my knowledge.

Signature: _____ Date: _____

**Return to: UCLA Extension Financial Aid Office, Attn: Private Alternative Educational Loan Programs,
1145 Gayley Avenue, Second Floor, Los Angeles, CA 90024 Fax: (310) 825-5686 Email: finaid@uclaextension.edu**