

SECTION 1: BORROWER INFORMATION

Your Signature

CareMax Education Loan Services

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Loan Account Creation Authorization

WARNING: Any person who knowingly makes a false statement or misinterpretation in this form or any accompanying document is subject to penalties that may include fines, imprisonment or both, under U.S. Criminal Code and 20 U.S.C 1097.

Please enter the following information correctly. *SSN: *Full Name: *Address: *City State Zip Code: *Telephone-Primary: Telephone-Alternate: *Email: *Account User Name: *Field proceeding an asterisk MUST be entered.

Date