Application	and Promisso	rv No	uuent L	oai	1									ANNUAL ST. LASS		
Section A: St	udent Informati		ease read instruc	tions t	efore compl	etina I	this and	dication								
Social Security Number 827464565	66.		Cost Maria		orore compr	cuing i	uno app	nication		First Nan	ne		90	0917		
Primary Phone Number	I AJOKUBI										UCHE BARRY					
3096600090	E E	Cell	and say I have light	rai	☐ Hoi		-mail addr							Date of		
Citizenship (select one	·	U.S. Citize					агтуајо	kubi@yaho	oo.com					04/2		
Permanent Address (S	itreet Address only-No P.			-Crozen Pe	rmanent US Reside	nt 	K	Foreign Citizen					VIGER	oreign Citizens		
405 BROADW	/AY				APT 19					City				State		
Prior Address (if you ha	ave been at your permane	nt address	less than one year, please p	provide pric	r address)					VORM	AL			ILLI		
Non-US Address									1	City				State/P		
US Address Non-US Address	or for every 10 files service 52 AC	ur permane	ent address, you can leave t	his section	blank)		_			City				State/Pi		
Repayment Option		R	ate Type	School	ol Name											
Degree/Certificate of St				ILLI	NOIS STAT	E UNI	VERSI	TY				Schoo	MAL			
MS	цсу				Course of Study)		Anticip	ated Graduation	VCompletion	Date	Errolmen		TAILE			
Requested Loan Amoun	nt		Cumulative GPA	Scale:	RMATION SY	STEMS	MA'	2015				E Full	Time [Hatt-Time		
s 15000			3.83		5.0 6.0	oth	ier	Academic Perio From (mm/dd/y)	id for the Lo; yyy)	To (r	nm/dd/yyyy)		Grade Levi Undergrad	el (select one)		
Employment Status STUDENT EM	PLOYMENT		Employer Name			- 1	paton	01/01/2014	Work	Phone No			Graduate xtension	Length of		
You do not need to rev	eal alimony, child supp	ort or main:	OIS STATE UNI tenance income if you do il Annual Gross Income	VERSI	TY	INF	ORMA	TION TEC	H	112270			101301	Years 1		
e 10000		Additiona	Annual Gross Income	HOTHISH	Source of Additio	onal incor	isis for loa me	repayment.	Addition	al House	old Annual Gr	oss Incom	- I Sa			
Do you have one or more	Residence Type S					Additional Household Annual Gross Income Source of Additional Household Annual Gross Income										
Other Sovings	heest-		Yes No	- 1		Rent	Пи	with parent(s)	Don		7.00		- 1	thly Mortgage/		
Personal Contacts: You Last Name	u must provide two (2) a	dult refere	tices, one of which should	l be a relat	ive. You may not	ist the co	signer as	reference. Re	derences m	m L	Other		390			
NWAOKWU					Frst Name UGONNA						- 0.0. 4001 (.3			nship to Stude:		
Address 2213 N ELLIS S	City									LEAGUE						
Last Name	PEORIA					NOIS 61604 309532			Phone Number 329316							
AJOKUBI	First Name NGOZI					Re				ship to Studen						
Address 1330 7th STREE	TABLE				City	_			State		Zip Code			HER		
Section B: Cosi	APT 1012 DO									Phone Numbe						
Social Security Number			Last Name								757	111		-55525		
418-02-	7558		OKORONKW	O'						IMAE	OLI .					
2024096566			Secondary Phone Number		Home		al address			_	140,000			Date of Birt		
Oltizenship (select one)					Cell		IM	<u>uau</u>	W T	UTIY	rail:	C	M	07		
Jornanda Address (Ch.)	√2 0:		Non-Citta	ten Perma	nent US Resident						,		Relat	lionship to Stu		
Sino Street	KIIP L	II D	2011/2						-CIV	_ 4			1	/ I C		
revious Address (If you have been at your permanent address less than one year, please provide price					(dridness)					Pringdale				MI		
					. 433 633)				City		0			State		
	od F	urrent Emp	ployer Name	.7	015	Occupa	lice	Joel	Work Ph	one Numi	ber	Exter	asion	Longth of Time		
	alimony, child support	Of mainten.	Since income if you do not	wish to h	<u> </u>		150	<u>ve//</u>	-			-		Years /C		
/ / / / / / / /	0 1	Uditional A	nnual Gross Income		Source of Additions	il income	for Joan re	payment.	Additional I	Household	Annual Gross	Income	Source	e of Additional		
rave the following assets (e					Davidana	T			5			-				
Checking Other Savings/Asse	Residence Type					Morting Mortingage Riv										
ection C: Stude	nt and Cosigner	Signat	ure		THE STATE OF				0		-		\$ /	8 WC		
AUTION - IT										_			100			
10.000.000.000.000.000.000	OTICE TO CUSTO	MER (a) DO NOT SIGN TI	HIS BEI	FORE	I dect	are that	the informati	ion provid	ded abo	ve is true a	and com	iplete to	the best o		
THE OUT ME	OVISED. (b) DO M	IOT SIG	ORY NOTE EVEN I IN THIS IF IT CON	F OTHE	RWISE	ounci.	, i ackiių	wiedde fliaf	i nave re	Ceived.	a lrue and	avact co	nou of th	ha Danierta		
IOKODONET BE	/ACT	ACT therein, I understand and agree that you may obtain a consumer condition								althoracy and the						
KEND MIE CO	VE THE	F THE application and in connection with any updates, renewals or extensions of am														
EFORE YOU BA	LANCE UNDER	THIS AC	AY IN ADVANCE T	THE UN	PAID	TOTAL!	OI GITY (valet tipillist i	DI IDIS IO:	an a⊪ cı	ume dichue	cod ama	4			
SIGN IT						Pius II	ווכו באן מו	ru all other r	ees, char	TRE AL	nd racte the	at many b		allow They		
						C(1)12	and CON	ditions set fo	irui in the	Promi	ssory Note	constit	ite the	entire agre		
										7	#-	-	1			
udent Signature			(seal)	Date			Cont	mae Classes		-7	My/)(($\langle \rangle$	١		
			Return Application To:			25 - 12***		mer Signatu		=	#	£-F-1	Afra	real) D		
FMI48	1/154	VO	٠ ۱۱			∍∍• Wil	кез-Вагте	, PA 18773-9-	435		1111	_	1	(0		
4	7 71 1 M. I	A # 1			~ ~ ~ ~	- 1										