## **SHORT-TERM LOAN SCREENING APPLICATION**

<b>REQUIRED INFORMATION</b> – Please print legibly			Date:			
Last Name	First Name	МІ		Race/Ethnicity		
Telephone Cellular		SCC E-mail		il Student ID Number		
Street Address	Apartment Number	City/State		Zip Code		
Current Employer		Address/City/Phone Number				
How did you hear abou	t this loan? Who referred you?					
FINANCIAL RESOURCES:		(Circle)				
	apply for Federal Financial Aid	Ϋ́	Ń	If no, please skip to question 3		
<ol> <li>Have you complete</li> <li>Have you been gra</li> </ol>	ed your SCC Financial Aid file? inted a tuition deferment?	Y Y	N N	If yes, when?		
<ul><li>4. What is your intended program of study?</li><li>5. Are you a veteran?</li></ul>		Υ	N	<del></del>		
Are you enrolled in Worker Retraining, WorkFirst,     BFET or Opportunity Grant?		Ϋ́	N			
7. Is this your first quarter at SCC?		Y	N			
<ul><li>8. Do you already have a college degree?</li><li>9. Do you have an academic advisor?</li></ul>		Y Y	N N	Name:		
PERSONAL REFER	ENCE: (We may contact this ind	ividual	to veri	ify information or to convey a message to you).		
Parent/Relative/Friend (circle one)		Address/City/State				
Telephone	elephone E-mail					
LOAN REQUEST: Amount Requested \$ How will you use this loan?						
What funding source(s)	) will you use to repay this loan?					
Describe the situation I	eading to your request for this loa	n:				