

# SLM Financial Corporation

a Sallie Mae company

Loan Application

**Fax Applications to:**  
1-856-596-3594  
**Call With Questions:**  
1-877-834-9851

**Mail Applications To:**  
SLM Financial Corporation  
PO Box 470  
Marlton, NJ 08053-0470

**WEB**



**Instructions:** *If all information is not completed in full, the processing of your application may be delayed. Initial any changes; do not use correction fluid. Bring to your school's financial aid office for school certification. This application must be completely filled out and certified by the school official. By submitting this application, you authorize SLM Financial to check your credit history whether or not your application is signed. Please Note: We will only fund SLM Financial approved schools.*

**Section A: Borrower Section: Please complete all information in this section**

Loan Amount Requested \$ _____	Repayment Term Requested (years): _____	Interest Only Payments? Yes No	If you selected 'yes' to Interest Only Payments, write the number of months in school for which you would like such payments to continue: Requested number of months(Maximum In School Only) : _____	
Full Name: Last First MI Jr. / Sr.		Social Security Number		Date of Birth (month/day/year)
Street Address Apt # Rural Route			Own	Rent
City State Zip Code			Home Phone ( )	
Mailing Address if different from Street Address above			Landlord / Mortgage Holder Name & Phone #	
Monthly Mortgage / Rent Amount \$ _____	Approximate Balance (Mortgage only) \$ _____	Approximate Home Value (If you own) \$ _____		Work Phone ( )
Employer Name	Position / Title	How Long Years Months	Other Income Source: \$ _____	
Employer Address State Zip Code		Gross Annual Salary \$ _____	Note: You should include income of your spouse or any person in your household who is jointly responsible with you for debts. You do not have to reveal alimony, child support or maintenance income unless you wish it to be considered as a basis for loan repayment.	
Reference Name (Do not use co-borrower.)	Reference's Permanent Address:		Reference's Home Phone	Relationship
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**Section B: Co - Borrower Section Please complete all information in this section if applying jointly.**

Relationship to Applicant:			Social Security Number	
Full Name: Last First MI Jr. / Sr.			Home Phone ( )	Date of Birth (month/day/year)
Street Address Apt # Rural Route			Own	Rent
City State Zip Code			Work Phone ( )	
Monthly Mortgage / Rent Amount \$ _____	Approximate Balance (Mortgage only) \$ _____	Approximate Home Value (If you own) \$ _____		How Long at Current Address Years Months
Employer Name	Position / Title	How Long Years Months	Other Income Source: \$ _____	
Employer Address State Zip Code		Gross Annual Salary \$ _____	Note: You should include income of your spouse or any person in your household who is jointly responsible with you for debts. You do not have to reveal alimony, child support or maintenance income unless you wish it to be considered as a basis for loan repayment.	

**Section C: Student Section: Please complete all information. Applicant may be the student.**

Full Name: Last First MI			Social Security Number	Date of Birth (month/day/year)
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**Section D: School Section: To be completed by an authorized school official.**

School Name		School Address		School Phone	Tuition Amount \$ _____
School Code/Branch	Date Classes Begin (Month/Year)	Date Classes End (Month/Year)	Authorized Disbursement Date (Month/Day/Year)	Anticipated Graduation / Completion Date (Month/Year)	

I hereby certify that the student in Section C is accepted for enrollment, or is enrolled, and in good standing. I further certify that the School will provide the loan holder or servicer subsequent information regarding the student's whereabouts, if requested by the loan holder or servicer. I further certify that the institution will comply with all applicable policies and provisions, and that the information provided in Sections A, B and C is true, complete and correct to the best of my knowledge and belief.

**School Certification: I have read and agree with above paragraph.**

Signature of authorized school official:	Print or type name and title:
Date	

This application will be submitted to SLM Financial Corporation for approval. I/we authorize SLM Financial Corporation to make whatever credit inquiries it deems necessary in connection with this loan application and in the course of review or collection of any credit extended in reliance on this application. I/we authorize and instruct any person or consumer reporting agency to furnish to SLM Financial Corporation any information that it may have or obtain in response to such credit inquiries and agree that such information, along with this application, shall remain SLM Financial Corporation's property, whether or not a loan is approved. All information set forth in this application is declared to be a true representation as to the facts, made for the purposes of obtaining the loan requested, and any willful misrepresentation in this application may result in criminal action. Sallie Mae and its affiliates may share credit and other information about you with each other for marketing and administrative purposes. If you do not want credit information about you from your application, consumer reporting agencies, or third parties shared with our affiliates, you will need to send us a signed letter telling us so with this application.

Borrower's Signature

Date

Co- Borrower's Signature

Date

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Visit us on the Web @ [www.salliemae.com/slmfin](http://www.salliemae.com/slmfin)