Emergency Tuition Loan Application

Students who are currently enrolled at the Health Sciences Center may apply for an emergency tuition loan to cover tuition and fees. Please read this information carefully and submit a signed copy with your short term loan application.

- Students may not apply for an emergency tuition loan less than 30 days prior to graduation.

- Submitting an emergency tuition loan application does not guarantee that the student’s classes will be held past the designated drop date for the semester. Students may still be subject to late fees and/or billing fees while the loan is being processed.

- In order to be considered, this loan application must be filled out completely, including the reference information and how the loan will be repaid.

- Failure to return the signed promissory note will result in this loan being cancelled. If this loan is cancelled, additional fees could be added, or your classes may be dropped for non-payment by Student Business Services.

- Failure to repay an emergency tuition loan by the due date will result in a hold being placed on your record. This hold could prevent class registration, transcript requests, and release of your diploma.

- This emergency tuition loan is not considered financial aid. If you wish to apply for financial aid please submit the Free Application for Federal Student Aid (FAFSA) at www.FAFSA.ed.gov.

By signing below I agree that I have read and understand the information stated above.

____________________________________    _______________    ______________
Student Signature                      Student ID Number               Date Signed
Emergency Tuition Loan Application

Student Information

Full Name: ___________________________________________ ________________________________
Last First M.I

Address: ___________________________________________ ________________________________
Street Address
City State Zip Code

Home Phone: (____)_________________ Student ID or Social Security Number: __________________
Birth Date: ___________________ Marital Status: _________________ Spouse’s Name: __________________

Spouse’s Employer: ________________________________ Spouse’s Work Phone: (____)________________

Reference Information

Full Name: ___________________________________________ ________________________________
Last First M.I

Address: ___________________________________________ ________________________________
Street Address
City State Zip Code

Home Phone: (____)_________________ Alternate Phone: (____)________________

Loan Information

Terms Preferred: (Circle One) 30 Days / 60 Days / 90 Days Amount Requested: ________________________________

How will you repay the loan? ______________________________________________________________

Student Signature: ___________________________________________ Date: __________________

FOR OFFICE USE

Considered By: _________ Approved Date: _____________ Amount: ___________ Voucher #: ____________

STL Due Date: _____________ Terms: _________ ___%: ___________ Prom Note Due Date: _____________

Loan Fund & Account: ________________

Comments: __________________________________________________________________________

Please return your application to the Financial Aid Office via:

Mail: TTUHSC Financial Aid Office
3601 4th Street, MS 8310
Lubbock, TX 79430-8310

Email: financial.aid@ttuhsc.edu
Fax: 806-743-3027