JANE I. SCHENCK FUND

**LOAN APPLICATION**:

I hereby apply for the loan of ………………………dollars ($…………) to be added to previous loan(s) of $………………, making a total of $…………………from the Jane I. Schenck Trust Fund for the purpose of helping defray my educational expenses at……………………………… .……..…………………………which I entered/expect to enter on……………………………….

Date of application……………………… Signed………………………………………………….

APPROVAL FOR THE JANE I. SCHENCK FUND:

…………………………………………………. Trustee

…………………………………………………. Trustee

…………………………………………………. Trustee

…………………………………………………..Trustee

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# NOTE FORM ……………………….New York

# Amount of Loan $……………………. …………………….…….., 20\_\_

# We, either of us jointly and severally, promise to pay to the Trustees under the Will of Jane I. Schenck, deceased, all loans totaling, $……………………., in the manner following, to wit: Payment of principal and interest shall begin not later than twelve months after the first day of the month following separation from school. Interest shall be calculated at the rate of 5% on the unpaid balance in accordance with the following schedule:

# 1 year - $0 - $1,000, 2 years - $1,001-$2,000, 3 years - $2,001 - $3,000, 4 years - $3,001 –

# $4,000, 5 years – over $4,001. A monthly repayment schedule will be established by NBT Bank of Norwich. Once repayment has begun, non-payment for three months shall be considered a delinquent account and referred to the attorney. If this debt is referred to attorneys for collection, we agree to pay attorney’s fees of twenty percent (20%) of the amount due, plus court costs or such lesser amount as the court may allow.

# Applicant………………………………………………Soc.Sec.#………………………………

# Print Name

Address ………………………………………………. Phone **#…………………………………**

# Applicant……………………………………………… Date of Birth…………………………… Signature

# Co-Signer………………………………………………Soc.Sec.#……………………………… Print Name

# 

Address ………………………………………………. Phone **#…………………………………**

# Co-Signer……………………………………………… Date of Birth…………………………… Signature

# 

Please note: Applicant must send verification of college registration to either the District Office of Afton Central School or Greene Central School.

JANE I. SCHENCK FUND

AFTON AND GREENE, NEW YORK

LOAN APPLICATION:

## Please Print

Applicant’s Name…………………………………………………………………………………

Address………………………………………………….Phone#…………………………………

………………………………………………………………..

Date of Birth………………………Social Security # ……………………………Veteran: yes or no

Married………………..If yes, name of Spouse……………………………………………………

High School…………………………………………………….Date of Graduation…………………………...

Where do you plan to study? …………………………………………………………………….

Course…………………………………..When do you expect to graduate?………………………

EXTIMATED COST OF SCHOOL YEAR: ESTIMATED RESOURCES:

Tuition and fees……………………………...From savings.…………………………………… Books……………………………………….. From scholarship grants.…………………………

Room…………………………………………From parents…………………………………….

Board…………………………………………From part-time work…………………………….

Travel………………………………………...From other sources……………………………….

Personal………………………………………Total Resources…………………………………..

Total cost……………………………………..

Do you own a car?……………………………

If you have a scholarship: What type?……………………………………………………………

How much?…………………………………………………………..

How long?……………………………………………………………

Have you made application for this loan through any other lending institution?………………….

If yes, give name……………………………………………………………………………………

Following is a statement of my present indebtedness, including amounts outstanding, and when due:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
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I certify that the above information is true and accurate, and that funds (monies) loaned to me will be used only for the

Educational program described.

Date………………………Signature………………………………………………………………