RETURN TO:

EOPS EMERGENCY LOAN APPLICATION

GLENDALE COMMUNITY COLLEGE

Extended Opportunity Program and Services 1500 North Verdugo Road Glendale, CA 91208-2894 (818) 240-1000, ext. 6900

APPLICATION MUST BE COMPLETELY FILLED OUT IN INK PRIOR TO APPROVAL [Please read the back of this application before signing]

(PLEASE PRINT)	Preferred Phone Number	<u></u>	GC	CC ID #			_
Name							_
Last	First	Middl	e	Spouse's First Na	me		
Address						_()
No.	Street	City		State		Zip code	
Phone No. ()			Birth Date_				_
Driver's License State			Driver's Lic	cense Number			_
Name of nearest relative not r	residing at the above address						_
	Nan	ne					
Address Street	City	State	Zip Code	Phone ()		_
Succi	City	State	Zip Code				
Student's Current Employer_				Phone ()		
1 , _	Name						_
Amount of Loan Requested \$_		LOAN TO BE REP	PAID FROM FI	RST AVAILABLE	FINANCI	AL AID CHECI	K
Circle the Reason for Loan: co	osts for books; college supplies; transport	cation (provide docu	umentation)				
PROMISSORY NOTE:	LO	AN DUE DATE				I, declare that	the statement
submitted by me in connection	with the determination of my loan are and ea	ach of them is, true	and correct, and	if the loan is granted	d, I agree to	pay this obligation	on according to its
	portunity Program and Services office at Gl						
	pondence promptly concerning this obligation E MY FINANCIAL AID CHECKS TO PA						
	State Franchise Tax Board for collection three				- ,	1	
	FO	R OFFICE USE O	ONLY				
Loan fund Name EOPS	School Year	/		Units Enrolle	d		
Amount of Loan \$	Repayment Date			Approved		Denied	
Authorization						Date	

Last updated 10/23/19