

## Private Loan - Education Plan Form

Please complete and return this form to the Financial Assistance Coordinator to complete the loan certification process. **We cannot certify your loan without this completed form.**

### Student information

STUDENT I.D. NUMBER (IF KNOWN)

LAST NAME

FIRST NAME

INITIAL

NAME OF LENDER

LOAN AMOUNT

### Education Plan

Provide information about the program you are applying to.

Please check one:

Part-time program (6 months)

Full-time program (3 months)

PROGRAM NAME

START DATE (MM/DD/YYYY)

END DATE (MM/DD/YYYY)

PLEASE TYPE OR PRINT CLEARLY

#### Office Use Only

Received by \_\_\_\_\_

Date \_\_\_\_\_

#### Questions? Contact Student Services

**Phone** ▶ (858) 534-3400, Option 2

**Number**

**Email** ▶ unex-finasst@ucsd.edu

#### Submit your completed form by:

**Mail to** ▶ Student Services  
 UC San Diego Extension  
 ATTN: FA Coordinator  
 9500 Gilman Drive, Dept. 0176-H  
 La Jolla, CA 92093-0176

**Email** ▶ unex-finasst@ucsd.edu

**Fax** ▶ (858) 534-8527