

## Private Loan - Education Plan

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 \_\_\_\_\_ M.I. \_\_\_\_\_

NAME OF LENDER \_\_\_\_\_ LOAN AMOUNT REQUESTED \_\_\_\_\_

### Proposed Education Plan

Provide a quarter-by-quarter plan for completing the requirements of the program you are applying to. For professional certificates, students are expected to enroll in a minimum of 6 units per quarter. For specialized certificates, students are expected to enroll in a minimum of one course per quarter.

Program Name: \_\_\_\_\_

QUARTER:  Fall  Winter  Spring  Summer | YEAR: \_\_\_\_\_

Course List	Units	Office Use Only

QUARTER:  Fall  Winter  Spring  Summer | YEAR: \_\_\_\_\_

Course List	Units	Office Use Only

QUARTER:  Fall  Winter  Spring  Summer | YEAR: \_\_\_\_\_

Course List	Units	Office Use Only

QUARTER:  Fall  Winter  Spring  Summer | YEAR: \_\_\_\_\_

Course List	Units	Office Use Only

### Student Certification

I understand that by signing this form, I am expected to adhere to the proposed schedule above and to maintain satisfactory academic progress each quarter, in order to continue receiving my loan disbursement checks each quarter. I understand that if I do not meet these conditions, my scheduled loan disbursements may be canceled or rescheduled for a later quarter.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE TYPE OR PRINT CLEARLY

#### For 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 ► 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