



**APPLICATION FOR A LOAN  
FROM  
NEW YORK STATE GRANGE STUDENT LOAN FUND**

**GRANGE VERIFICATION**

We hereby certify that \_\_\_\_\_ has been a member in attendance  
(Name of Applicant)  
for at least six months and is in good standing of \_\_\_\_\_ Grange. We  
recommend this applicant as a person of good character and one who is deserving of the aid of this  
Fund.

Signed \_\_\_\_\_ President (Master)

\_\_\_\_\_ Secretary

(Seal of Grange)

Note: If the Master and/or Secretary of the applicant's Grange is the applicant or the guardian of the applicant, then other elected officers of the Grange should be substituted to sign the application.

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**IMPORTANT NOTICE**

1. Do not apply for more than \$1,000.00 per semester or \$2,000.00 per year.
2. Applicant must have been a member of a New York State Subordinate/Community Grange for at least 6 months and be in good standing when applying for the loan.
3. If a loan is granted, the student will be expected to repay the loan within the loan terms stated in this application. This financial obligation is as great as though the money was borrowed from any other source. There is even greater obligation as this assistance has been made possible by the fraternal cooperation of all Granges in New York State.
4. Please write clearly, fill out all forms and send to:

New York State Grange  
Student Loan Fund  
100 Grange Place  
Cortland NY 13045

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**Student's Reference**

Name (please print) \_\_\_\_\_

Home Address: \_\_\_\_\_

DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Address when in School/College (if known) \_\_\_\_\_

College or School Name and Address: \_\_\_\_\_

Phone Number: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Previous Schooling: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Father's Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Address: \_\_\_\_\_

Estimated Expenses for the year: \_\_\_\_\_

What courses/major in school are you taking? \_\_\_\_\_

How Many years will your education take to complete? \_\_\_\_\_

How many loans will you require: \_\_\_\_\_

Date you expect to complete education: \_\_\_\_\_



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\_\_\_\_\_  
Date

I, \_\_\_\_\_ being \_\_\_\_\_ years of age and a member of \_\_\_\_\_ Grange in good standing, hereby apply for a loan of \$\_\_\_\_\_ from the New York State Grange Student Loan Fund for a period of \_\_\_\_\_ years to enable me to attend \_\_\_\_\_ School/College.

If I receive a loan, I agree to pay interest at a rate of **two and one-half percent** annually and principle starting with the first payment being due within 30 days of six months after my graduation date, followed by **monthly payments** due by the **last day of each month**. I further agree to pay the loan in full upon graduation within the loan terms and no longer than six years after completion of my education. I have read these rules governing the use of the Fund.

\_\_\_\_\_  
**Applicant's Signature**

I, \_\_\_\_\_, do hereby guarantee repayment of above said  
(Print name of co-signer)  
loan if applicant defaults within the loan terms.

\_\_\_\_\_  
**Co-Signer Signature**

\_\_\_\_\_  
**Relationship to Applicant**

Co-Signer's Address: \_\_\_\_\_  
\_\_\_\_\_

(Do not write within this box. For NYSG Loan office use only.)	
This loan was approved on ____/____/____ by _____	
Applicant notified by Email/letter/phone.	Loan Number: _____

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**Of the total loan requested in this application, the loan amount to be borrowed for the next semester is:            \$\_\_\_\_\_ (Maximum \$1,000.00 per semester)**

Applicant's Signature \_\_\_\_\_

Co-Signer Signature \_\_\_\_\_