

**ST. JOHN PAUL II CATHOLIC SCHOOL TUITION LOAN APPLICATION**  
**SCHOOL YEAR (2020 - 2021)**

Amount Requested: \_\_\_\_\_

Student Name: \_\_\_\_\_

Applicant Initials    Co-Applciant Initials

**APPLICATION DEADLINE: MARCH 31, 2020**

**We intend to apply for joint credit.**

**APPLICANT INFORMATION:**

_____			
Applicant's Name (PARENT OR GUARDIAN)	Social Security #		
Address	City	State	Zip
Email Address	Daytime Phone	YES	NO
		Active Military Duty/Reserve?	
Employer's Name	Applicant's Occupation		
Employer's Address	City	State	Zip

**CO-APPLICANT INFORMATION:**

_____			
Co-Applciant's Name	Social Security #		
Address	City	State	Zip
Email Address	Daytime Phone	YES	NO
		Active Military Duty/Reserve?	
Employer's Name	Co-Applciant's Occupation		
Employer's Address	City	State	Zip

In applying for this loan, I certify that the statements contained herein are true. I understand that any willful misrepresentations on this statement could result in a fine and/or imprisonment under provisions of U.S. Criminal Code. The Bank is authorized to obtain any information which it deems necessary for approval. As long as the Bank remains the holder of my Note, it may share any information regarding my Note including, but not limited to, my (our) payment history, with St. John Paul II Catholic School (Guarantor) and I (we) hereby consent to the sharing of such information with St. John Paul II Catholic School by Bank.

**THE PERSON SIGNING THIS APPLICATION MUST BE THE SAME PERSON WHO SIGNS THE FINAL PAPERS.**

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applciant's Signature

\_\_\_\_\_  
Date

**Mail Application to:**

Karen Arevalo or Rosie Pena  
 Allegiance Bank  
 8800 Katy Freeway  
 Suite 110  
 Houston, Texas 77024

**PLEASE BE SURE THAT THE APPLICATION IS COMPLETE, AS LOAN REQUESTS CANNOT BE PROCESSED WITHOUT THE APPROPRIATE INFORMATION.**  
**ALSO, A COPY OF EACH APPLICANT'S AND CO-APPLICANT'S DRIVER'S LICENSE MUST ACCOMPANY THE APPLICATION OR IT WILL NOT BE PROCESSED.**

