Academic Year 2009-2010

JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH
Financial Aid Office
615 N. Wolfe Street, Suite E1002
Baltimore, MD 21205-2179
(410) 955-3004 Phone Fax (410) 955-0464
www.jhsph.edu/Student_Affairs/financial

Private Loan Supplemental Application

This application is for students who want to apply for alternative loans from private lending institutions and have not completed the Federal Student Aid application process. International students, special student limited and students enrolled on less than half-time basis are eligible to apply for alternative loans. See lenders' websites for specific eligibility requirements, interest rates, and repayment terms.

Last four digits of SSN

Name _____ Soc.Sec. # xxx-xx-_____

Current/Local Address_____
(Street) (City) (State) (Zip)

Current Telephone Number (_____)_____ E-Mail Address _____

Department _____ Degree _____

Part-Time/ Internet Based Program (yes/no) _____ Anticipated Graduation Date _____
Month/Year

Anticipated Enrollment Status -- **Complete for each term of enrollment at the Bloomberg School of Public Health.**

Term	# of Anticipated Credits:
Summer I (6/1/09-7/3/09)	_____
Summer II (6/22/09-8/21/09)	_____
Summer Term (7/1/09-8/21/09)	_____
1st Term	_____
2nd Term	_____
Winter Intersession (1/4/10-1/15/10)	_____
3rd Term	_____
4th Term	_____

Will you receive funding support (tuition, insurance, or fees) from your academic department in 2009-2010? Do not include stipends.

Yes/No _____ If yes, list funding amount per year: $_____

If you are a JHU employee, will you receive tuition remission/reimbursement funding from Johns Hopkins in 2009-2010?

Yes/No _____ Unknown at this time ____

Other sources of tuition support: Include any aid not administered by the School of Public Health - Scholarships, Employer Education Benefits, Veterans Education Benefits, or financial support from any organization.

Agency **Amount/Yr**

_____ $_____

_____ _____
Signature Date