



PERKINS LOAN QUESTIONNAIRE

Must be completed by students awarded a Federal Perkins Student Loan

Contact the Collections Office to make an appointment to sign the promissory note by calling **801-863-8611**.
No money will transfer without the completion and approval of this form by the UVU Collections Office.

ALL REFERENCE INFORMATION **MUST** BE IN THE UNITED STATES

Student ID Number	Driver's License Number	Driver License State	
First Name	Middle	Last Name	Maiden Name
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced	Estimated Graduation Date
Day Phone #	Eve Phone #	Cell Phone #	E-Mail Address

Mailing Address	City	State	Zip
Residence Address (NOT PO BOX)	City	State	Zip
Permanent Address	City	State	Zip

Name of Current or Previous Employer	Phone #	Fax #
Employer Address	City	State Zip

Spouse's Name	Phone#	Spouse's E-mail
Spouse's Employer	Phone #	Fax #
Spouse's Parent	Address	Phone #

****PLEASE COMPLETE THE REVERSE SIDE OF FORM****
BOTH SIDES MUST BE COMPLETED IN FULL

**PERSONAL REFERENCES (List people you will still be in contact within 5 years)
NO DUPLICATE NAMES, ADDRESSES OR PHONE NUMBERS**

Parent Or Guardian Name	Phone #	Cell #	E-mail address		
Address		City	State	Zip	
Parent or Guardian's Employer	Address	City	State	Zip	Phone #

Grandparent's Name	Phone #	Cell #	E-mail address		
Address		City	State	Zip	

Nearest Relative (NOT Parent)	Address	City	State	Zip	Phone/Cell #
Nearest Relative (NOT Parent)	Address	City	State	Zip	Phone/Cell #
Friend or Relative (Circle)	Address	City	State	Zip	Phone/Cell #
Friend or Relative (Circle)	Address	City	State	Zip	Phone/Cell #

Security Questions – To prevent identity theft
The name of your high school:
Your mother's maiden name:
The make of your first car:

My Plans and Location for the next 12 months:

I certify that the all the information on this form is correct and complete & I hereby authorize verification as required. I will immediately notify the UVU Collections Office of any changes.

Student Signature	Date
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Approved by: UVU Collections Office	Date
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