

or activities.

Promissory Note CHARLES E. SCHELL FOUNDATION STUDENT LOAN PROGRAM

Northwest State Community College 22600 State Route 34 Archbold, Ohio 43502

l,	, NSCC ID () promise to repay Northwest State
	he amount advanced to me as recorded	d below and endorsed by my signature of
acceptance.		
	Amount of Loan	
	\$	
I further understand	and agree that:	
•	ursuant to this note is drawn from a fun and is subject to the terms and provisio	d created by the Charles E. Schell Foundation, Fifth ns noted hereafter:
 This loan shoul 	d be interest-free throughout its life;	
Repayment of to	his loan will provide financial assistanc	e to other Northwest State students;
 I agree to disc Community Co 	uss a repayment schedule with the Fi llege for any reason;	nancial Aid Office upon leaving Northwest State
•	ial circumstances, repayment of the tot f the date after which I leave Northwes	al amount of this loan should be completed within t State Community College;
I agree to notify	y Northwest State Community College o	of any address changes;
States of Amer	ica; that my parents were born in and a of Ohio, Kentucky, or West Virginia; an	hat I was born in and am a citizen of the United are citizens of the United States of America; that I d that I am loyal to the United States of America
Community Co		A on a 4.0 scale, and I authorize Northwest State my GPA to the Fifth Third Bank Foundation Office an funds.
	REPAYMENT	SCHEDULE
six (6) months of gra		ent of the Charles E. Schell Foundation Loan within ollment drops below 6 credit hours. I agree to pay
Borrower Printed Na	me:	
Borrower Signature:		Date
		Date
NSCC Official's Title		

Northwest State Community College does not discriminate on the basis of race, color, national origin, sex, gender identity, disability, religion or age in its programs

Applicant Information (please print clearly using black ink) Borrower Name: ______ NSCC ID: _____ Street Address: _____ State___ Zip ____ Cell Phone: (_____) _____ Home Phone: (_____) ____ Date of Birth: ______ Last 4 of borrower social security number: xxx - xx - ____ Primary email address: **Family Information** Mother or Guardian Father or Guardian Name Name Address _____ Home Phone Home Phone Cell Phone _____ Cell Phone Email _____ Email _____ Non-Relative References Name _____ Relationship _____ Relationship _____ Address Address Home Phone _____ Home Phone _____ Cell Phone Cell Phone Email _____ Email _____ **Important Information Regarding Loan Repayment** Repayment will begin 6 months after the student graduates, stops attending, or drops below 6 credit hours. The Financial Aid Office will send you a repayment letter and a payment book one month before your repayment period begins. Payments will be due the 1st of each month.

Checks should be made payable to the NSCC Business Office. Please mail the check and payment coupon to Northwest State Community College, Attn: Financial Aid Office, 22600 State Route 34, Archbold, OH 43502. Please include 'Schell Loan Payment' on the memo line. You may also call the Business Office at 419-267-1311 to make a credit card payment.

You must notify the Financial Aid Office of any changes of name or address.