EMPLOYEE EMERGENCY LOAN INFORMATION SHEET

The loan program is available to faculty/staff that are 50% time or more, have passed their 6 month probationary period. *Temporary Services (TES) and Per Diem employees are not eligible for this program.*

The maximum amount of a loan is $1000. It can take up to 7 to 10 business days from the date a loan package is submitted for the employee to receive the funds. Employees are eligible for one emergency loan every two years.

*A loan package consists of the following:*

1. A completed Employee Emergency Loan Application that includes the immediate supervisor’s signature.
2. The Emergency Loan Policies, signed/dated.
3. A denial letter from a bank or credit union for a personal loan of $1,000.
4. An estimate/quote that justifies the need for the loan.

*Note:* Mortgage payments, rent, insurance, car payments, etc. are not unexpected expenses and will not be considered.

*Return completed package to Student Business Services, Mail Code 0025*
Employee Emergency Loan Fund Application

Disclosure of Social Security Number: Pursuant to the Federal Privacy Act of 1974, you are hereby notified that disclosure of your Social Security Number is voluntary. This record-keeping system was established pursuant to the authority of The Regents of the University of California under Article IX, Section 9 of the California Constitution. The Social Security Number is used to verify your identity.

Privacy Notice: The State of California Information Practices Act of 1977, effective July 1, 1978, requires the University to provide the following information to individuals who are asked to supply the information about themselves. The principal purpose for requesting the information on this application form is to determine the eligibility for an Employee Emergency Loan. University Policy authorizes maintenance of this information. Furnishing all information requested on this form is mandatory. Failure to provide such information will delay or may even prevent completion of the action for which the form is being completed. Information furnished on this application may be used by the University departments for loan collection and repayment. Individuals have the right of access of his record as it pertains to themselves. The information on this form will be maintained at the Student Business Services Office, 3rd floor Student Services Center, Mail Code 0025.

---

Applicant_________________________ Male ______ Female ______ Date of Birth________________

Last Name           First Middle

Emp I.D. #_________________________ Drivers License#_________________________ State_____

Home Address_________________________ City_________________________ State____ Zip________

Cell/Home Phone Number_________________________ Work Phone Number_________________________

Position Title_________________________ Department_________________________ Mail Code ______

Spouse’s Name_________________________ Spouse’s Employer_________________________

Supervisor Name: __________________________

Supervisor, please sign below for verification that you are the applicant’s immediate supervisor and that the applicant is in good standing. Student Business Services will call to confirm.

Supervisor Signature: __________________________ Supervisor Ext._________________________

---

References

Name_________________________ Name_________________________.

Address_________________________ Address_________________________

City, State_________________________ City, State_________________________

Phone #_________________________ Phone #_________________________

---

THE MAXIMUM LOAN AMOUNT AVAILABLE IS $1000.00 TO BE REPAID WITHIN A 1 YEAR PERIOD.

I hereby make application for an Emergency Loan of $________ for the following purpose:

_______________________________________________________________________________________________________

_______________________________________________________________________________________________________

The loan will be paid back via a payroll deduction over a period of one (1) year.

I understand the conditions of the Promissory Note I will be required to sign are:

1. Repayment in monthly/semi-monthly installments will be subject to the Mortgage Origination Program Interest rate which is equal to the most recent four quarter average rate of return of the University’s Short-Term Investment Pool plus an administrative fee of 0.25%.

2. Upon termination of my university employment, any unpaid balance together with interest due and any applicable late payment charges will be deducted from any and all sums due me from the University.

3. Prepayment may be made without penalty and with interest accrued to date of prepayment.

---

I agree to inform the Student Business Services Office, (858) 534-6806, of any change of address as long as any portion of my loan remains unpaid and will answer all correspondence concerning this obligation.

Signature of Applicant __________________________ Date ______________