



**SCHOOL OF LAW
OFFICE OF STUDENT FINANCIAL SERVICES**

LENDER CERTIFICATION

Last Name: _____ First Name: _____

SSN or Univ. ID #: _____ E-mail Address: _____

Graduation Date (mm/yyyy): _____

INSTRUCTIONS: Please complete Part A of this loan information request form and forward the form to the holder of each of your educational loans borrowed while in attendance at NYU School Of Law.

Part A (To be completed by applicant)

I, _____, authorize _____ to provide the information
(Applicant Name - print) (Lender Name - print)

requested in Section B to NYU School Of Law.

Applicant Signature

Date

Applicant Address City State Zip

Applicant Telephone

Please return this form to:
NYU School of Law, Office of Student Financial Services,
245 Sullivan Street, 4th Floor,
New York, NY 10012
or fax to (212) 995-4525

Applicant Last Name: _____ First Name: _____

Part B: (To be completed by lender)

Dear Lender:

The above individual has applied to a program at NYU requiring information about educational loans borrowed from you. Please complete the information below reporting ACTUAL loan repayment terms and return it to our office by mail or facsimile at your earliest possible convenience. *If the borrower's loans are in grace, deferment or forbearance, please provide estimates of the repayment information.* Please feel free to make copies of this page as needed. Thank you for your assistance.

Loan Number	Type of Loan	Amount Borrowed	Total Amount Outstanding	Amount of Monthly Payment	Date First Payment Due	Date Last Payment Received	Date Next Payment Due	Interest Rate %	Repayment Period (years)

Is the applicant delinquent or in default? _____ How many days? _____

Are the applicant's loans in grace, deferment, or forbearance? _____ Until when? _____

Comments: _____

Name and Title of Authorized Lender Representative (print)

Signature _____ Date

Lender Name

Lender Address

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