

APPLICATION FORM

1. STUDENT'S PERSONAL INFORMATION

Name of Student _____
(Surname) (First Name) M.I.
Student No. _____ SAIS ID No. _____ College _____ Degree/Year Level _____
Contact No.: Landline _____ Mobile No. _____ Email Address _____
Permanent Home Address _____
(House No./Street/Subdivision) (Barangay)
(Town/City) (Province)

2. LOAN (For computation of OSA Loan Staff Only)

Total Matriculation Fee (TMF) ₱ _____
Amount of SLB Loan applied for ₱ _____
Cash Payment upon Enrollment ₱ _____
Interest Rate per Annum 6%
Payment Term 1 term
Due Date December 13, 2019

I would like to apply for loan from the University Student Loan Board Program. I am aware of my accountability to pay the loan I applied for with interest on the date stated above. I promise to adhere to the deadline and I understand that failure to comply shall mean that I may not be able to register in the succeeding semesters nor be given clearance from the university. I certify that all the information in this form are true and correct. I understand that cases of dishonesty such as forgery and falsification of records shall be filed at the Student Disciplinary Tribunal in accordance with Section 2 (m) of the University's Rules and Regulations on Student Conduct and Discipline.

Student's Signature

3. CO-DEBTOR

I am willing and capable of serving as co-debtor of _____ who is applying for loan from Student
(Student's Full Name)

Loan Board Program. As a sign of willingness, my valid ID card is with him/her which will be presented upon application. I share the same responsibility for the payment of the loan in case the debtor fails to pay this obligation.

Name of Co-Debtor: _____
Printed Name Signature
Relationship to Debtor (Pls. Check) ☐ Parent ☐ Relative (pls. specify relationship to the debtor) _____
Co-Debtor's Complete Home Address: _____
Contact Number: Landline _____ Mobile No. _____ Email Address: _____

4. a) Processed by:

b. Certified correct:

c. Approved:

CICERO M. PEÑAFLOR
Coordinator, Student Loan

ELENO O. PERALTA
Director, OSA

Procedures and requirements for SLB application:

1. Student Loan Board (SLB) is open to all qualified undergraduate and graduate students except to those students taking-up non-degree programs.
2. Students with outstanding loans will not be allowed to avail of any further SLB unless there is a promissory note approved by the Chancellor. Promissory notes should be processed first before applying for SLB.
3. Fill-out the SLB application form legibly and have it signed by your co-debtor. Acceptable co-debtors are parents and immediate relatives by consanguinity which include grandparents, uncles and aunts from both sides, and brothers and sisters who are of legal age. Your co-debtor's middle or last name should reflect your relationship with each other. Please provide your birth certificate or any other supporting documents as proof of your relationship.
4. For students with changes in their ST System Percentage Discount, please proceed to Rm. 5 for tagging of new ST System Percentage Discount before submission of SLB application form.
5. Submit 2 copies of the form (1 original and 1 photocopy) and present the co-debtor's original valid ID (with picture and signature) to the student loan personnel at Window 2 and/or 3, OSA-SFAD, Room 6, 2/F S.U. Bldg. Valid IDs that may be presented are driver's license, SSS ID, GSIS ID, PhilHealth ID, current company/office ID, postal ID, BIR TIN ID, Barangay ID, Voter's ID, or passport.
6. Maximum loanable amount is 80% of the total assessed fees. One hundred percent (100%) loan may be granted provided a request to avail of 100% SLB is approved by the Chancellor. **Request form** is available at Window 2 and/or 3, OSA-SFAD, Room 6, 2/F, S.U. Bldg. or you may download it at OSAM website at www.uplbsa.org.
7. If you decide to pay your matriculation fees in full after approval, return this form to OSA-SFAD for loan cancellation.
8. A demand letter/notice will be sent to the student borrower and the co-debtor once the loan/s has become overdue.

DATA PRIVACY CONSENT FORM

The undersigned, one of the applicants/grantees of the _____, has given permission to the OSA staff in charge of the scholarship/financial assistance in the collection, lawful use, and disclosure of my personal information which may include my student number, name, contact information, address, course, academic performance (i.e. number of units enrolled, subject's with grade/s obtained) and grant details.

I, further confirm that the OSA and other appropriate offices in the University are authorized to provide the above information to legitimate offices/institutions requesting specific information in relation to the awarding/renewal of my scholarship/financial assistance within the specified academic period.

This consent enables the OSA to comply with R.A. 10173, otherwise known as the Philippine Data Privacy Act of 2012.

I certify that the information given above is true and correct.

I consent to the processing of my personal and sensitive personal information contained in this form and in documents submitted for my scholarship/financial assistance application for the purpose of enabling the University of the Philippines System including all the relevant System and Constituent University Offices to verify my identity, prevent fraud, process my application, determine whether I am qualified to avail of my scholarship or other similar financial or other assistance, conduct research using non identifiable information in order to study the effectiveness of the University's scholarships and other financial assistance programs and assess how to improve the systems for the selection and execution of scholarship/financial assistance programs.

I further expressly agree that the concerned System and/or CU office may directly obtain all my relevant student records whether in electronic or paper based format in order to verify the information contained in my application for the purpose of determining my eligibility for the scholarship and other financial assistance from the relevant UP Registrar, disciplinary board or tribunal and other University offices.

I expressly authorize the University to provide information required by the scholarship/financial assistance funders or sponsors for the purpose of enabling the latter to determine whether or not to continue to provide financial and other assistance with the assurance that the University will require such parties to observe strict compliance with the Philippine Data Privacy Act and other related laws and issuances when they process my personal and sensitive personal information.

I understand that the University of the Philippines including System and CU offices are authorized to process my personal and sensitive personal information without need of my consent pursuant to the relevant portions of Sections 4, 12, and 13 of the Philippine Data Privacy Act.

Signature over printed name of student

Date: _____

If the student is a minor:

Signature over printed name of parent/guardian

Date: _____