



Sallie Mae Financial Assistance Application

Tuition: \$1990 How many years would you like to have to repay? _____ years

Personal Information:

Last Name: _____ First: _____ Middle initial: _____

Social Security#: _____ Drivers Lic #: _____

Date of Birth: _____ U.S. Citizen: Yes ___ No ___

Street Address: _____ City: _____

State: _____ Zip: _____ How long living there? _____ years

Own _____ Rent _____ Live with relative _____ Home Phone:() _____

Email: _____ Monthly mortgage/rent: \$ _____

Mortgage balance (if owned): \$ _____ Home value: \$ _____

Landlord/ Mortgage Holder _____ Phone _____

Employment Information:

Employers name: _____

Employers address: _____

City: _____ State: _____ Zip: _____

Work phone: _____ Your job or title: _____

How long have you worked there? _____ years _____ months

Annual Salary: \$ _____

Additional Income: \$ _____ Source: _____

References: (1 personal reference is needed)

#1 Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Relationship to you: _____

Return by mail to: Home Inspection Training Services,
700 N. Lake St #201, Mundelein, IL. 60060

Or by fax to: (847) 566-6333