

Lilly SERVE Post-Baccalaureate Internship Application

I, _____ declare that I have been approved by the Post-Baccalaureate Program Coordinator at Seattle Pacific University to receive Lilly SERVE funded student loan repayment support up to \$1,200.00 while acting as a yearlong post-baccalaureate intern. As a recipient of the student loan repayment support, I agree to the following:

1. I will not use the support received for anything other than loan repayment. Funds from Lilly SERVE at Seattle Pacific University will only be used for student loan repayment.
2. Improper use of Lilly SERVE funds for anything other than student loan repayments will result in immediate termination of support by Lilly SERVE.
3. I agree to participate in the orientation and debriefing programs and to notify the program coordinator of any changes in my internship status.

Applicant Information

Name: _____
Permanent Address: _____

Address to send checks (if different from above): _____

Social Security #: _____
Email: _____
Phone: _____
Cell Phone: _____

Internship Information

Institution: _____
Address: _____
Supervisor: _____

Phone: _____
Start Date: _____
End Date: _____

Loan Information

Loan Servicing Agent: _____
Address: _____
Monthly Payment Amount: _____
Repayment Start Date: _____

All of the information stated above is correct to the best of my knowledge.
I agree to abide by the terms as stated in this contract.

Signature

Date

For Office Use Only:

Approved by: _____

Date