

Loan Information
The Ohio Veterinary Medical Licensing Board
Veterinary Student Loan Repayment Program

Directions: Please list only the loans you are requesting to be paid. For each loan listed, attach a copy of the loan agreement and a current statement from the lender showing the balance.

Section I: Applicant Information

Name (Last, First, MI) _____ Social Security No. _____

Address: _____

City, State, Zip Code _____ Telephone No. () _____

Have you consolidated your loans for undergraduate costs with veterinary medical school loans? Yes No
If yes, attach a copy of the loan documents, which reflects the new consolidated loan.

Section II: Lender Information

This program pays for the educational costs for the veterinary medical degree only, as listed on page 1 of the application. If loans have been consolidated, a determination will be made of the proportion of the consolidation loan that will be paid for a successful applicant. Only Institutional or Government loans are eligible including Stafford, SLS, HEAL, Perkins, and others. The total amount allotted for veterinary medical school loan pay off is a maximum of \$20,000.

Total loan repayment requested for all loans: \$ _____

Award Year	Disbursement Date	Type of Loan/Holder	Original Loan Amount	Current Balance	Date of Balance	Projected Payoff Date

Are any parts of the loan(s) listed above being paid by another organization? Yes No
If Yes, specify the amount being paid for applicable loans and the name of the organization.
Amount - \$ _____
Payer – _____

Certification:

I certify that the information given in this application is accurate and complete to the best of my knowledge and belief. I understand that it may be investigated and that any false representation is sufficient cause for rejection of this application.

Signature of Applicant

Date