



The University of Georgia

Student Accounts – Loan Servicing 424 East Broad Street 110 Business Services Building Athens, Georgia 30602-4226
Phone: (706) 542-6834 Fax: (706) 542-3959 Email: ugaloans@uga.edu

FINANCIAL STATEMENT

Use black ink, print legibly and complete entire form

SECTION 1: Borrower's Information

Print Name: _____ Last four digits of your SSN: _____ Email: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____ Marital Status: _____

Employer (Name and Address): _____

SECTION 2: Borrower's Family Information

Spouse's Name: _____ Number of Dependents: _____

Spouse's Employer (Name and Address): _____

SECTION 3: Monthly Income Information

Gross Income: _____ Spouse's Gross Income: _____ Total Other Monthly Income (include source): _____

Checking Account Balance: _____ Savings Account Balance: _____

SECTION 4: Monthly Expenses Information

Alimony: _____ Child Care: _____ Child Support: _____ Clothing: _____ Credit Cards: _____

Entertainment: _____ Food: _____ Housing: _____ Insurance: _____ Medical/Dental: _____

Perkins Loan(at UGA): _____ Student Loans(other than UGA): _____ Transportation: _____ Utilities: _____

Miscellaneous(include source): _____

SECTION 5:

Why are you delinquent on your loan(s) at this time? _____

What are your plans for bringing the loan current? _____

Please provide any additional information that you feel may be helpful in determining your eligibility for a deferment. _____

SECTION 6: Borrower's Certification

I understand that additional information and documentation may be required. I authorize the University of Georgia to make whatever inquiries that it deems necessary in connection with the review of information concerning my current income and my ability to repay my loan(s). I certify that all statements made above are true and correct, I will notify the University of Georgia if my present situation changes.

Signature: _____ Today's Date: _____