Paul Herringshaw Memorial Student Loan Fund

GENERAL INFORMATION

The Lincoln County Rotary Student Loan Fund is dedicated to the education of students in Lincoln County. With the generosity of the Centralina Development Corporation and the establishment of the Paul Herringshaw Memorial Student Loan Fund, we will be managing one loan per year to 6 additional counties: Cabarrus, Gaston, Iredell, Lincoln, Rowan, Stanly and Union, to be funded with the funds donated by the Centralina Development Corporation in memory of their founder, Mr. Paul Herringshaw. These loans are separate and apart from the loans funded by the efforts of the Lincoln County Rotarians through the Rotary Auction for Education. **These loans will be interest free for the first 4 years you are enrolled full time in an institution of post high school learning.** Afterwhich, interest rates will be 3% annually and paid semi-annually while the student remains in school full time or paid monthly once the student graduates or leaves school, whichever comes first.

REOUIREMENTS FOR OBTAINING A HERRINGSHAW MEMORIAL STUDENT LOAN

- 1. You must be a high school graduate or have obtained a GED, and be a current resident of one of the following counties: Cabarrus, Gaston, Iredell, Lincoln, Rowan, Stanly or Union County.
- 2. You must have graduated from high school with a 2.50 cumulative GPA or if you have previously been enrolled in college, have a cumulative GPA of 2.50 (grades are required). If at any time your GPA falls below 2.50, no additional monies will be disbursed until your grades are brought up to the required GPA.
 - You must be enrolled as a full time student. (12 semester hours for regular semesters or 9 semester hours for summer semester). If this is your first loan, you must provide proof of admission.
 - You must have two (2) Co-Borrowers to sign your promissory note with you. Your Co-Borrowers must be 18 years of age or older and live in one of the 7 counties listed above. Co-Borrowers must be gainfully employed or own property in one of the 7 counties listed above. (Both parents may co-sign your note if they meet the above qualifications.)
- 3. You will be required to complete an application and promissory note each year before you receive the loan.
- 4. On a separate page, please submit a 100 word essay telling us why you should receive the loan interest free for 4 years. This is required the 1st year only.
- 5. Applications must be filled out completely with a current transcript and proof of acceptance attached (if you are a graduating high school senior) or the application will be rejected.
- 6. All applications *must be complete and postmarked* by June 1st or they will not be eligible for consideration for the upcoming school year unless the deadline has been extended. Official postmarks are acceptable proof of timeliness.

RULES GOVERNING THE HERRINGSHAW MEMORIAL STUDENT LOANS

- 1. You may only receive a total of four (4) annual loans through this loan program. If you continue to be in school full time after the original 4 years, three percent (3%) interest will be charged semi-annually, due and payable each June 30 and December 31. You will be invoiced semi-annually via email. A four percent (4%) late fee will be assessed if interest is not paid by the due date. Additionally, the note will be called due and payable if interest remains unpaid for 30 days.
- 2. At the completion of each semester you must promptly furnish us with a copy of your grades for that period to determine annual eligibility.
- 3. One month after graduation your loans will come due. At that time you may either pay the amount you owe in full, or we will set the amount up on sixty (60) monthly payments. You should contact the Lincoln County Rotary Student Loan Fund office at least two months prior to your graduation. The rate on your monthly repayment note will be 3% (10% if in default). A four percent (4%) late fee will be charged if monthly payments are received more than 14 days after each due date.
- 4. If at any time you withdraw or are forced to withdraw from school, your repayment schedule will begin in accordance with the above paragraph. In addition, should you be enrolled in less than 12 semester hours for more than one year, repayment must begin in accordance with the above paragraph and you will no longer be eligible to receive additional loans. *Each semester that you participate in the loan program, school verification is required.* It is also a condition of this loan that you inform us if you are no longer in school and of any address change.
- 5. The funds are a restricted contribution to be used to fund one (1) loan per year to the seven (7) named counties as long as the funds are available. Each year that the initial chosen recipient remains eligible (up to a maximum of four (4) years), and chooses to accept the loan, no additional loans will be available to their respective county. After the 4th year, when the student begins repayment, or sooner if the initial recipient is no longer eligible and has begun repayment, the loan will be made available to the respective county, and the cycle will begin again.

PO Box 682, Lincolnton, NC 28093 www.rotarylinc.org
Email: ann

704-732-0867

APPLICATION CHECK LIST

Please use this checklist to make sure you have completed your application fully and have attached all required documents.

It is recommended that you make a copy of your application before mailing. Incomplete applications will not be considered.

1.	$\frac{100}{\text{See pg 1, #4.}}$
2.	Application is filled out completely. (There can be no blanks. Please use N/A only if it doesn't apply. Financial information is not optional.)
3.	There are three personal references with complete addresses & phone numbers listed.
4.	Student & both Co-Borrowers have signed and dated the application
5.	Borrowers & 2 Co-Borrowers - are you residents of one of the seven (7) counties listed or do you own property in one of those seven (7) counties? If not, you are not eligible to sign this note.
6.	Co-Borrowers have filled out their portion completely, including income, three credit references with complete addresses, phone #'s, account numbers (required) and balances, <i>NO EXCEPTIONS</i> .
7.	If this is NOT your first Paul Herringshaw Memorial loan, attach a copy of your most recent completed grades ONLY IF they were not mailed after the completion of your fall semester. If funded, you will be required to provide your spring grades & pay your semi-annual interest (if applicable) before funds can be disbursed.
8.	FIRST TIME APPLICANTS – Proof of acceptance at the school you will be attending is attached. (Application is not complete without this information.)
9.	FIRST TIME APPLICANTS – A copy of your most recent transcript (high school or college) has been attached.
10.	Please make sure postmark date is legible. Applications received after June 1 st without a June 1 st postmark or an illegible postmark will not be considered. (Only an official US Postal postmark is acceptable proof.)

Please Keep This Page for Your Records.

INCOMPLETE APPLICATIONS OR APPLICATIONS THAT DO NOT INCLUDE ALL OF THE REQUIRED DOCUMENTS WILL NOT BE CONSIDERED.

All Applications must be mailed to: Lincoln County Rotary SLF, PO Box 682, Lincolnton, NC 28093

Email: annabmullen@rotarylinc.org

Paul Herringshaw Memorial Student Loan Fund Application POSTMARK Deadline - June 1st

EVERYTHING MUST BE FILLED OUT COMPLETELY AND ATTACHMENTS INCLUDED OR APPLICATION WILL BE REJECTED.

STUDENT APPLICATION INFORMATION

Applicants Full Local Nama		Tolo#		
Applicants Full Legal NameE-mail		1 eie #		
Permanent Address			State	7in
Date of Birth	Social Security Number		Sex:	
High School Attended			-	
Name of School/College You Attend/Plan				
Estimated Date of College Graduation?	Month		Year	
School Address	City		State_	Zip
What Will Your Course Of Study Be?				
Name of Employer	Telepl	none Number		
Address	City		State_	Zip
Occupation		How Long With	Emplo	yer
Gross Income per Month				
Marital StatusSpouse's Name				
Spouse's Address	City		State_	Zip
Spouse's Occupation	Employer_	Gross Ir	come p	er Month
Spouse's Employer's Address				
				_
Father's Full Name				
Address	City		State_	Zip
Mother's Full Name	Tele #	Fmail		
Address		Linan		
Tiddless			_5	_
PLEASE LIST THREE PERSONAL REFERENCE				
FULL NAME (required)	COMPLETE ADDRESS (required)	TELEP	HONE	NUMBER (Required)
1				
2				
3				
	FINANCIAL ARRANGEMENTS			
ESTIMATED ANNUAL SCHOOL COSTS		TO BE FURNISHE	D BY ST	CUDENT
Tuition \$	Help From Family	\$		
Room \$	Part Time Job	\$		
Meals \$	Work/Study Program	\$		
Books \$	Scholarships	\$		
Fees \$	Other	\$		
Other \$				\$5 000 000
TOTAL \$ Total	amount for which you are applying		(maxin	num \$2,000.00)
I certify that I have read and understand the infe			estions	completely
and honestly to the best of my knowledge, and	agree to comply with all said rules and requ	irements.		
Applicant's Full Legal Signature		Data	Δ	

PO Box 682, Lincolnton, NC 28093

www.rotarylinc.org

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CO-BORROWER INFORMATION

1st Co-Borrower						
Full Legal Name		Te	elephone Number			
г ч	/T	• 1\	_			
Marital Status Da	te of Birth	Soc	cial Security Number			
Marital Status Da Address		<u>Ci</u> ty		State	Zip	
Name of Employer		Τe	elephone Number			
Name of EmployerAddress		City	<u> </u>	State	Zip	
Occupation			How Long Wit	th Employe	er	
Gross Income Per Month						
		Monthly PaymentTypes of Accounts				
MUST LIST THREE CREDIT REFEREI						
		_	_		_	
Name/Business	Complete Address	Account Num	ber Telephone N	<u>umber</u>	Balance	
	_					
I certify that I have completed the a	hove questions completely	and honestly to th	a best of my knowledg	10		
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Co-Borrower's Full Legal Signatur	e]	Date	
2nd Co-Borrower						
		\mathbf{T}_{c}	Janhana Numbar			
Full Legal NameEmail						
Marital Status Da	te of Rirth	(Required)	rial Security Number			
Marital Status Da Address	te of Bitti	Soc	siai becarity i vaimber	State	Zin	
Name of EmployerAddress		16	elepnone Number	Ctata	7:	
AddressOccupation		City	How Long Wit	State th Employe	Z1p	
~ 1,			now Long with	л Ешрюус	il	
Gloss meome i ei Montii						
Do You Own/Rent Your Home			_ Monthly Payment_			
			pes of Accounts			
MUST LIST THREE CREDIT REFEREI	NCES (not optional): Please List Co	omplete Addresses, Acco	ount Numbers, & Telephone N	Numbers for ea	ch reference given	
Name/Business	Complete Address	Account Num	ber Telephone N	umbor	Balance	
<u>Ivanic/Business</u>	Complete Address	Account Num	Telephone IV	umoci	Dalance	
I certify that I have completed the a	hove questions completely	and honestly to th	e hest of my knowledg	10		
1 certify that I have completed the a	wore questions completely	and noncony to th	e sest of my knowieus	,		
Co-Borrower's Full Legal Signatur	e				Date	
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