

Student Fiscal Services  
Box 355870  
Seattle, WA 98195 -5870

Current Accounts (206) 543-4694  
Past Due Accounts (206) 543-4694  
Web: [www.mycampusloan.com](http://www.mycampusloan.com)

**PLEASE TYPE OR USE INK**

**ANSWER ALL QUESTIONS FULLY**

**Financial Statement**

Social Security Number:	
First Name:	Last Name:
Mailing Address:	
Daytime Phone: ( )	Evening Phone: ( )
Spouse Name:	Number of Dependent?

**I would like to make the following additional comments regarding my financial situation:**

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I declare that the information shown on this document is true and accurate I further declare that I will notify my lender immediately upon change in my status. I further understand that if I default on the terms of any agreement made with the University of Washington that I jeopardize eligibility for possible future hardship deferment benefits. I understand that completion of this document does not guarantee benefits will be granted by the University of Washington.

Further, I authorize the University of Washington to verify employment, salary, and expenses.

**Signature of Borrower** \_\_\_\_\_  
**Date** \_\_\_\_\_

