

**GRADUATE SCHOOL**  
**STUDENT EMERGENCY LOAN PROGRAM APPLICATION**

**Email application to [gradfinance@stonybrook.edu](mailto:gradfinance@stonybrook.edu)**

Name \_\_\_\_\_ SBU ID \_\_\_\_\_

Address \_\_\_\_\_

Program \_\_\_\_\_ Amount Requested \$ \_\_\_\_\_ (Max. \$2000.00)

**Reason for Request:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note: You may attach, or we may request, appropriate documentation of need for loan.**

Will you have funds available for repayment within 90 days?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

**Please explain:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that I am a full-time matriculated Stony Brook student in good academic/financial standing with the University, and all statements made by me on this application are true to the best of my knowledge. I understand that I am incurring an obligation to the University at Stony Brook and that it is my responsibility to repay this loan no later than 90 days from the date of approval. I understand that this loan is interest free. I understand and agree that if I fail to repay this loan, for any reason, I will be subject to University sanctions such as being ineligible to register for classes, withholding of transcripts and diplomas, and being held liable for outstanding chargers to the University.

\_\_\_\_\_

Student's Signature

\_\_\_\_\_

Date

---

**FOR OFFICE USE ONLY**

\$ \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_ Repayment Date \_\_\_\_\_

**Reason for Denial or Adjustment Requested:**

\_\_\_\_\_  
\_\_\_\_\_

Authorized Signature \_\_\_\_\_