



AMERICAN LEGION AUXILIARY— DEPARTMENT OF WISCONSIN

M. Louise Wilson Educational Loan Fund Application

Promisor name _____ Date of Birth _____
First MI Last

Mailing address _____
City/State/Zip

Phone # _____ Email: _____

I am a member of Auxiliary Unit # _____ located in _____
City

My member ID # is _____ I am the _____ of _____
Relationship Name of Veteran

Who entered the _____ on _____ and was honorably discharged on _____
Branch of Service Date Date

I graduated from _____
High School Town/City

Co-Signer _____
First M.I. Last

Address of Co-Signer _____
City/State/Zip

Phone # _____ Email: _____

Relationship to Promisor _____

My choice of school _____ Course of study _____

School entrance date _____ School completion date _____

REFERENCES:

- Three letters of reference (on letterhead) are required from: Pastor, Superintendent of School, Teacher, Counselor, or Business Proprietors. Relatives are not accepted as references.

NOTE: PLEASE ATTACH LETTERS OF REFERENCE AND HIGH SCHOOL GRADE TRANSCRIPT

I believe the above information to be true; and hereby make application for a loan of \$ 800.00 from the *M Louise Wilson Educational Loan Fund*. I will use the money for education for myself. I understand if I withdraw from full-time student status, this loan shall mature and become payable in regular monthly installments of not less than fifty dollars (\$50.00) each. I agree to begin loan repayment no later than six (6) months after I cease being a full-time academic student. Loans are renewable for up to five (5) years, for a total loan limit of \$4,000.00.

Applicant's signature _____ Date _____

No interest will be charged on the money loaned unless loan is in default.