

Yale University
Andrew W. Mellon Mays Undergraduate Fellowship Program
Request for Partial Loan Repayment

Instructions: Upon completion of each full year of doctoral study, (a) Complete this form and (b) Ask the appropriate school official (Registrar) to submit an official transcript of all graduate course work completed to date to the address listed below.

PART 1: Graduate Study Verification

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STUDENT:

Name: _____ SSN: _____

Current Mailing Address: _____

Telephone Number: _____ Email address: _____

Name of Graduate Institution: _____

Address of Graduate Institution: _____

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ADDITIONAL GRADUATE SCHOOL INFORMATION:

Field of Specialization: _____

Doctorate Degree Sought Please specify: _____

Year of Study Completed: __ (1st) __ (2nd) __ (3rd) __ (4th) __ (5th) __ (6th)

Master's Received: __ (Y) Conferred __ /Anticipated __ on (Date): _____

M.Phil. Received: __ (Y) Conferred __ /Anticipated __ on (Date): _____

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PART 2: Loan Verification

LOAN INFORMATION

Please provide the following information for ALL loans you incurred during your academic studies:

LOAN (Please list loan type, lending institution, and origination date)	ACCOUNT NUMBER	ORIGINAL AMOUNT	REMAINING BALANCE	Payment Preference*
<i>Example: Stafford, Sallie Mae, 09/2009</i>		\$6,500	\$5,000	1

*Please prioritize which loan(s) should be paid first, using preferences 1-5 (with 1 being the highest preference)

Have you consolidated your loans. Yes No If yes, please list the name and address of current lender(s) below:

LOAN (Please list loan type, lending institution, and origination date)	ACCOUNT NUMBER	ORIGINAL AMOUNT	REMAINING BALANCE	Payment Preference*#
<i>Example: Stafford, Sallie Mae, 09/2009</i>	44-382957923-01	\$6,500	\$5,000	1

*Please prioritize which loan(s) should be paid first, using preferences 1-5 (with 1 being the highest preference)

Please include a loan payment slip in order to expedite repayment process

VERIFICATION OF INFORMATION

I claim partial repayment on my undergraduate loan(s) for a full year of doctoral studies—in an eligible field of study as determined by the Andrew W. Mellon Mays Undergraduate Fellowship Program—completed during the period indicated.

Applicant's Signature _____ Date _____

WHEN COMPLETED, PLEASE RETURN THIS FORM AND A LOAN PAYMENT SLIP TO:

Sharleen Sanchez
 Yale College Dean's Office
 P.O. Box 208335
 55 Whitney Avenue STE 630
 New Haven, CT 06510