

Below is a draft of your promissory note for your review. If you agree, you may sign the note at the bottom of the page.

Cosigner 1) First:

Middle:

NOTE: An email will be sent to your cosigner from webmaster@ecsi.net.

Please make sure that you have them 'white list' this email address so it is not directed to spam.

THIS IS AN IMPORTANT STEP IN THE COSIGNER PROCESS.

		Academic Year
	CHAPMAN UNIVERSITY INTEREST FRE	EE LOAN PROMISSORY NOTE
University Drive, Orange, CA 92866, or such other	er place as the holder hereof may from time to time designate in w	rsity Harriet S. Salmon Interest Free Loan Program (the "payee"), at its principal office located rriting, in lawful money of the United States of America, the principal sum of payor's tuition account as stipulated by the current Notice of Financial Aid.
The payor further understands and agrees that		
	REPAYMEN	т
University and ending, unless paragraph 3 2. The payor has the right at any time to prep 3. The payor shall repay the principal on this repayment rate of principal on all loans to	in monthly installments, as determined by the payee, over a perior (3) applies, then (10) years later. oay all installments due on this note. loan at the rate of \$50.00 per month, even though the monthly rat the payor under this trust is less than \$50.00 per month. nt, volunteer or military status, IS NOT provided for by this note.	. d beginning six (6) months after the date the payor ceases to be a full-time student at Chapma e that would be established under paragraph I (1) is less than that amount, if the total month
	DEFAULT	
payable with interest at the rate of ten per 2. This note shall also become due and payab consents to, or acquiesces in the appointm discharged in thirty (30) days; or the payor against the payor, and if instituted against 3. Payor promises to pay costs of collection (i 4. The payor, and all endorsers, surettes, and 5. The payor agrees that Chapman University	reent (10%) per annum. ble upon demand of the payee or subsequent holder hereof if the p leent of a trustee or receiver for the payor; or in the absence of such makes an assignment for the benefit of creditor; or any bankruptor the payor, is consented to or acquiesced in by the payor or remains including collection agency fees, reasonable attorney's fees, and co guarantors hereof, hereby jointly and severally wave presentment,	urt costs) id default is made in the payment of this note. notice of dishonor, and protest of this note. or grade reports. Payor also agrees that Chapman University may withhold said security upon a
	CHANGE IN NAME, ADDRESS AND S	OCIAL SECURITY NUMBER
1. The payor is responsible for notifying, in w	riting, the payee (specifically the department in charge of loan coll-	ection) of any change or changes in the payor's name, address or social security number.
	GENERAL	
Payor agrees to meet with designated office payor fails to comply with exit interview re Any notice or communication to the payee Orange, CA 92866, such other place as the This note and the rights and obligations of The undersigned hereby waive all rights co The loan evidenced by this note may be wi	equirements. required or permitted by this notice shall be in writing and may be payee may from time to time designate in writing. the payor, the payee and any subsequent holder shall be governed inferred by the statute of limitations in any action on this note, the	rawal or graduation from the university. A hold may be placed on academic transcripts and/or e personally delivered or sent by mail, addressed to the payee at Business Office, One Universi
Unsigned		Unsigned
SIGNATURE		DATE
PERMANENT ADDRESS		
PHONE	SOCIAL SECURITY #	DRIVERS LICENSE
THORE	CO-SIGNER INFOR	MATION
Guarantor hereby waives all notice of delinquenc	cy, default, or presentment and guarantees that he/she will pay all	delinquent sums promptly upon notice of said delinquency.
	Uns	signed
NAME OF GUARANTOR		NATURE OF GUARANTOR
		Unsigned
,,,		
		DATE
	***_**_ SOCIAL SECURITY #	DATE DRIVERS LICENSE

Confirm Email:

☐ I accept the p	romissory note as present	ed above and affix	my electronic signature below.
First:	Middle:	Last:	
E-Signature: (Please type	e your full, legal name)		
	and signature for this document.		
Submit			