FILE COPY ADBGSLF Form 1 Revised Sep 2021

A. D. BUSTRILLOS GRADUATE STUDENT LOAN FUND

Control No				
	New			
	Old Applicant			

	Al	PPLICATON FC	RM	
			DATE:	
NAME:				
	FIRST NAME	MI.	Degree/Major/C	ollege
Campus Address:			E-mail Address:	
Permanent Address:			Contact No:	
LandBank Account Numbe				
		AN AGREEN		
I agree that the amount of			(in words)(1	o(ín
figures)) granted to me during the			Semester A.Y	will be paid on
or before the last da	y of classes of the	same seme	ster including the in	terest computed as
follows = [5% × A × (D/360)], and [109	% x A x (D/	360)] for remaining	days after the due
date until payment.				
I understand	and agree that	I cannot	enroll nor be given	clearance without
paying the loan and	the interest in fu	и		
PURPOSE OF LOAN:				
GUARANTOR'S PROMISSOR	RY NOTE			
I am aware and willingly tal		. •		
interest if ever the Borrowe Also, I certify that my m	er of this loan fails to do s nonthly net take home pa			ature of Barrower
Printed Name of Guarantor Signature of Guarantor			PAYMENT	RECEIVED:
Position: Ho	ome Unit:	_ Contact No		Date
COMMITTEE'S ACTION				
RECCOMENDING APPROVAL:			APPROVED:	
MA. KRISTINA	G. ALINSUNURIN			
Committee Member			PAMELA A. CUSTODIO	

College Secretary, Graduate School