

CAVCO INVESTMENT, INC.
12100 Metcalf Circle, Fairfax, VA 22030
703-803-1060 Fax 703-803-1062

STUDENT LOAN CREDIT APPLICATION
PLEASE PRINT CLEARLY

Date: _____

Client: _____

Whether or not married, you have the right to apply for credit separately from or jointly with your spouse or another person.

I apply for: Joint credit with my spouse or another person

Individual credit in my name only

Applicant's Last Name: _____ First Name: _____ Initial _____

Address: _____ Apt. _____ City _____ State _____ ZIP _____

Number of Years at this address: _____ Home Telephone No. (_____) _____

Work Telephone No. (_____) _____ Cell Telephone No. (_____) _____

Date of Birth: _____ Social Security Number: _____

Married/Single/Divorced _____ No. of Dependents _____ Do You Pay Child Support _____ Do You Receive Child Support: _____

Monthly Child Support/Alimony Payments \$ _____ Driver's License Number/State _____

Do you own or rent? _____ Rent or Mortgage Payment \$ _____ Name of Landlord or Mortgage Holder _____

Landlord/Mortgage Holder's Telephone No. _____

Year/Make of Automobiles: _____

Former Address _____ City, State, Zip _____ Years _____

Former Address _____ City, State, Zip _____ Years _____

Applicant's Employer _____ Mo./Yr. Hired _____ Work Telephone # _____

Occupation _____ Salary/Hourly/Commission \$ _____

Former Employer _____ Dates of Employment _____ Telephone # _____

Position/Occupation _____ Salary/Hourly/Commission \$ _____

Former Employer Address _____

Co-Applicant's Last Name: _____ First Name: _____ Initial _____

Address: _____ Apt. _____ City _____ State _____ ZIP _____

Number of Years at this address: _____ Home Telephone No. (_____) _____

Work Telephone No. (_____) _____ Cell Telephone No. (_____) _____

Date of Birth: _____ Social Security Number: _____

Married/Single/Divorced _____ No. of Dependents _____ Do You Pay Child Support _____ Do you receive child support: _____
Monthly Child Support/Alimony Payments \$ _____ Driver's License Number/State _____

Co-Applicant-Do you own or rent? _____ Rent or Mortgage Payment \$ _____

Name of Landlord or Mortgage Holder _____ Landlord/Mortgage Holder's Telephone No. _____

Co-Applicant: Year & Make of Automobiles: _____

Former Address _____ City, State, Zip _____ Years _____

Former Address _____ City, State, Zip _____ Years _____

Co-Applicant's Employer _____ Mo/Yr Hired _____ Work Telephone # _____

Occupation _____

Salary/Hourly/Commission \$ _____

Former Employer _____ Dates of Employment _____ Telephone # _____

Position/Occupation _____ Salary/Hourly/Commission \$ _____

Former Employer Address _____

If Military, Branch or Service _____ Pay Grade _____ Enlistment Expires: _____ Telephone # _____

Release/Discharge Date _____ Salary _____

If Self Employed Business Name _____ Phone # _____

Business Address: _____

Applicant/Co-Applicant-Other Source of Income/Amount per year _____

Have any Applicant filed for Bankruptcy in the past 7 years? _____ If so, when? _____

Final Bankruptcy Discharge Date _____

Name of Bank _____ Branch _____ Bank's Address _____

Checking Acct. No. _____ Balance \$ _____

Savings Acct. No. _____ Balance \$ _____

Money Market Account No _____ Balance \$ _____

| Name of Creditor or Company | Address or Location | Acct. # | Item or Security | Open | Closed | Payment Balance |
|--------------------------------------|---------------------|---------|------------------|-------|--------|-----------------|
| 1. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Major Credit Card or Other Reference | | | | | | |
| 4. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Dept Store or Other Reference | | | | | | |
| 5. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Finance Co. or Other Reference | | | | | | |
| 6. _____ | _____ | _____ | _____ | _____ | _____ | _____ |

LIST TWO RELATIVES AND ONE FRIEND NOT LIVING WITH YOU

| Name | Address | Phone # | Relationship |
|----------|---------|---------|--------------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ |

I HEREBY ACKNOWLEDGE that I am over the age of eighteen (18) years and all of the information set forth in this credit statement is true, accurate in full and complete disclosure thereof. I hereby authorize any holder of the Promissory Note/Retail Installment Contract or any person, firm or corporation requested to extend credit thereunder (including any employee or agent of any of them), to communicate with any person, firm or corporation including my employer in respect of my credit worthiness. In the event that credit is extended to me in respect of my Promissory Note/Retail Installment Contract, I hereby authorize any holder thereof, the creditor, my attorney, debt collector or collection agency (their agents or employees), to communicate with any person, firm or corporation, (including my employer), in respect of such debt. I further authorize any holder of the Promissory Note/Retail Installment Contract, the creditor thereof, my attorney, debt collector or collection agency communicating any and all information concerning this application or debt to any credit reporting agency or other creditor. I further acknowledge and agree, that I will notify the creditor or in writing of any change in my name, address or employment within a reasonable time thereafter.

Customer's Signature _____

Co-Signature _____