



Village of Newburgh Heights

3801 Harvard Avenue
Newburgh Heights, OH 44105
216-641-4650
Newburgh-oh.gov

NEWBURGH HEIGHTS COMMUNITY IMPROVEMENT CORPORATION STUDENT LOAN ASSISTANCE GRANT PROGRAM APPLICATION

PERSONAL INFORMATION

Name: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

Ohio Driver's License No.: _____

Social Security Number: _____

Names of Other Persons in Household:

INFORMATION REGARDING REAL PROPERTY

Date of Purchase: _____

Purchase Price: _____

Name and Address of Seller: _____

Relation to Seller: None

Mortgagee: _____

Amount of Mortgage: _____

**The Following Items Must Be Attached:
Certified Copy of Deed of Record;
Proof of Purchase Price¹
Proof of County Designation as Single-Family Home**

DEGREE INFORMATION

Undergraduate Degree or Nursing Degree

Name of Institution: _____

Dates of Matriculation: _____

Graduation Date: _____

Degree Earned: _____

Graduate Degree (1)

Name of Institution: _____

Dates of Matriculation: _____

Graduation Date: _____

Degree Earned: _____

Graduate Degree (2)

Name of Institution: _____

Dates of Matriculation: _____

Graduation Date: _____

Degree Earned: _____

Post-Graduate Degree

Name of Institution: _____

¹ Include as many of the following as possible: Purchase Agreement; HUD-1 Settlement Statement; Mortgage; Escrow Receipt; other proof of payment of purchase price.

Dates of Matriculation: _____

Graduation Date: _____

Degree Earned: _____

Please attach certified transcripts of your academic record in connection with each degree earned.

INFORMATION REGARDING STUDENT LOANS

Name of Lender: _____

Type of Student Loan: _____

Principal Amount of Student Loan Debt: _____

Maturity Date: _____

Name of Lender: _____

Type of Student Loan: _____

Principal Amount of Student Loan Debt: _____

Maturity Date: _____

For each Student Loan, the Following Items Must Be Attached:

Any Contract, Loan Document or Promissory Note;

Proof of Status of Loan/Loan Summary Statement

APPLICANT REPRESENTATIONS

By Signing this Application, the Applicant represents that all of the information provided herein is correct. The Applicant understands that falsification of any information set forth herein will be grounds for denial of the application.

Applicant has read and understands the eligibility criteria for the Student Loan Assistance Grant Program. The Applicant understands that he/she must remain domiciled in the Village of Newburgh Heights and must live in the home he/she purchased in the Village of Newburgh Heights in order to achieve the vesting milestones

outlined in the Student Loan Assistance Grant Program Guidelines. The Applicant understands that he/she must be current in the payment of any property taxes or other taxes or assessments due and owing with respect to the property. The Applicant understands that only one person per household is eligible to receive a Student Loan Assistance Program Grant.

By signing below, I affirm that the information provided herein, including, but not limited to, information provided on this Application and any supporting documentation provided in connection with this Application, is accurate, true and correct.

By: _____
Applicant Signature

Print Name: _____