



## **Alaska Supplemental Education Loan (ASEL) 2016/2017 Cosigner Agreement**

Please provide the Application ID associated with the primary borrower's application and Promissory Note:

### **COSIGNER INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver's License State: \_\_\_\_\_ # \_\_\_\_\_  
Mailing Address (P.O. Box or Street): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Telephone Number: ( ) - \_\_\_\_\_

### **STUDENT/BORROWER INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

### **REFERENCES**

Provide two separate references with different U.S. addresses. Your references should be someone with whom you expect to remain in regular contact. We will contact your references if we need to verify or update your contact information.

**Reference 1** Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Reference 2** Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### **COSIGNER AGREEMENT AND PROMISE TO PAY**

#### **THIS IS A LOAN THAT MUST BE REPAID**

I PROMISE TO PAY to the Alaska Commission on Postsecondary Education the loan amount borrowed plus interest and fees. I have read, understand, and will abide by all terms and conditions set forth in this Promissory Note. I understand the terms and conditions apply to me jointly and separately from the primary borrower.

I further understand, 1) my liability for the loan begins when the borrower's obligation begins and continues even if the borrower dies, is disabled or has his/her obligation discharged in bankruptcy or canceled before the loan (including interest) is repaid in full; and 2) collection action authorized by law will be taken against me (the cosigner) if this loan becomes delinquent or in default.

By signing, I certify under penalty of perjury that all information I have provided in support of this application is true to the best of my knowledge and I have sufficient monthly income to repay this debt. I further certify that I meet all eligibility requirements and that I do not have a status that would prevent me from repaying this loan as it becomes due, including any conditions that prevent future employment. I agree that any stray marks or notations made to this Promissory Note in places other than fields requiring borrower/cosigner completion will not become part of this agreement. Note: *A person who makes a false certification has committed a criminal offense.*

Signature of Cosigner (In Ink): \_\_\_\_\_ Date: \_\_\_\_\_

**Sign, date, and return to ACPE at the address listed above. Notarization of signature is required.**

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_

Signature of Notary:

My Commission Expires: \_\_\_\_\_