



**SAINT LOUIS UNIVERSITY SCHOOL OF MEDICINE**  
**The Dr. and Mrs. Richard and Muriel Saunders Med School Loan Fund**  
 Family Medicine  
**2018-2019 Application**  
 Application submission priority date: April 1, 2019

<b>APPLICANT INFORMATION--PLEASE PRINT</b>		<b>SLU ID # :</b>
Last Name:	First Name:	M.:
Street Address:	City, State & Zip:	
Phone:	E-mail Address:	
Requested Amount: \$		
Please indicate which of your current year loans you would like to be replaced by this loan: _____		
_____		



Office of Student Financial Services, 1402 South Grand Blvd., C 120, St. Louis, MO 63104  
Phone: 314-977-9840, Fax 314-977-9811, Email: [sfp@slu.edu](mailto:sfp@slu.edu)  
Web:

# SCHOOL OF MEDICINE

## The Saunders Medical Loan Fund (SML) Checklist

### **Section I: To be submitted by student to Student Financial Services**

The following documents are the required documents to apply for and receive the SML loan.

- The SML Application with completed worksheet or current account statement attached
- The 2018-2019 FAFSA with parental data: [www.fafsa.ed.gov](http://www.fafsa.ed.gov)
- The 2018-2019 Validation documents as listed on the SML Application
- The SML Promissory Note
- The Application and Self-Certification
- The SML Certification of Post-Residency Training form to be completed annually until loan is repaid in-full

### **Section II: To be completed after Application submitted and processed**

- The University Accounting Services (UAS) on line exit counseling at: <http://www.uaservice.com/>
- The University Accounting Services (UAS) Deferment form to be completed annually until residency training is completed. <http://www.uaservice.com/>
- The SML Certification of Post-Residency Training form to be completed **annually** until loan is repaid in-full

Documents should be returned to:

Saint Louis University  
Student Financial Services  
1402 S. Grand Blvd.  
Caroline Rm. 120  
St. Louis, MO 63104