



STUDENTS' LOAN BUREAU

GUARANTOR RECORD

UPDATE

TO BE COMPLETED BY GUARANTORS WHO HAVE SIGNED INDEMNITY FOR COURSE APPROVAL

ACADEMIC YEAR: _____ TO _____

LAST NAME:

FIRST NAME:

MIDDLE NAME:

TRN:

Permanent Address:

Home Telephone: - Cellular Telephone: -

E-Mail Address:

Mailing Address if different from above:

Occupation

Place of Employment:

Work Address

Relationship to Applicant

Work Telephone: - Work Tel. Extension: -

I hereby acknowledge that I have signed for program approval and that by executing this document I am indicating my agreement to continue to be a Guarantor for the above mentioned beneficiary for the duration of his/her approved course of study, and for the duration of the loan contract, subject to the terms and conditions outlined in the Master Agreement.

Guarantor's Signature: _____ Date: _____

Witness Name _____

Witness Signature _____ Date: _____

NB. Witness can only be an Attorney at law, Justice of the Peace, Pastor, Employer and the form should bear the respective stamp.

Beneficiary/Applicant's Information

Beneficiary's Name:

Beneficiary's TRN:

Beneficiary's Institution:

For Internal Use Only:

Record Updated by: _____ Signature: _____

Date: _____