



TERI GUARANTEED LOAN PROGRAMS
SCHOOL REQUEST FORM

DOE Code: _____ **Tax ID Number:** _____

Institution Name: _____

Website: _____

School Contact: _____

Title: _____

Email: _____

Phone: _____

Address: _____

Fax: _____

School Type: Proprietary Non-Profit
 Public

Date Began Operation: _____

Enrollment Total: _____

Cost of Attendance

School Year: _____

Including:

Tuition & Fees: _____

Room & Board: _____

Other Expenses: _____

Total: _____

Graduation Rate: _____

Job Placement Rate for Graduates including Calculation Method: _____

Average Starting Salary for Graduates including Calculation Method: _____

List of Affiliate Schools With Which You Have Credit Transfers: _____

Name of Parent Corporation (if any): _____

Has School Changed Ownership in Last Three Years: Yes No

Has School been involved in any Investigations or Legal Proceedings in the Last 3 Years:
 Yes No If yes, please explain on a separate sheet.

Has School ever been Terminated by an Education Lender: Yes No If yes, please explain on a separate sheet.

Accrediting Agency: _____

Referring Lender: _____

Please check all TERI Guaranteed Programs You are Applying for:

Undergraduate

Health Profession

other (please specify)

Graduate

Continuing Education



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Materials for Evaluation

Please complete and return the Request Form along with the following materials:

All materials must be submitted with the Request Form. TERI may refuse to evaluate incomplete responses.

- The most current three (3) years of audited financial statements.
- A copy of the certification or letter stating that the school is accredited by a U.S. Department of Education or Council for Higher Education Accreditation recognized regional or national accrediting agency.
- A copy of the school's state license or registration to operate a proprietary school or a certificate of Good Standing from your state.
- A school course catalog.
- A list of the school's Principal Administrator, Directors and Owners.

Please submit all information to:

Ms. Lisa Speranza
School Group
TERI
31 St. James Avenue, 4th Floor
Boston MA 02116
866.235.6766 (fax)
617.535.6823
speranza@teri.org

TERI is not an accrediting agency and TERI's acceptance of an educational institution for eligibility in TERI Guaranteed loan programs does not constitute accreditation for any school. School eligibility to participate in TERI Guaranteed loan programs is determined by TERI in its sole discretion in consultation with The First Marblehead Corporation. Accordingly, TERI may deny or terminate a school's eligibility at any time for any reason.

By signing below, I certify that I am authorized to submit this request and I further certify that all information provided in response to this request is true, complete, and correct; does not contain any false statement or misrepresentation; and makes no omission that renders other information false or misleading.

School: _____

Signature: _____ Date _____

Name: _____ Title _____
(Please print)