

FINANCIAL AID STUDENT LOAN REFERENCE SHEET

Instructions: Please complete this form accurately and return it to the Financial Aid Office within (5) business days.
A minimum of (4) complete references is required. *(Please be sure to save a copy for your records)*

Ocean County College Information

Address: College Drive, P.O. Box 2001	OPEID: 002624-00
City: Toms River	Phone: 732-255-0310
State: New Jersey Zip: 08754-2001	Fax: 732-864-3865
Web Address: www.ocean.edu	Email: financialaid@ocean.edu

Student Information

Name:	SS#: _____ Student ID: _____
Current Address:	Personal Email: _____
City:	Home Phone: _____
State: _____ Zip: _____	Cell Phone: _____

REFERENCES:

Spouse's Information

Name:	SS#: _____
Current Address:	Personal Email: _____
City:	Home Phone: _____
State: _____ Zip: _____	Cell Phone: _____

Parent 1 Information

Parent 1 Name:	Parent 2 Name: _____
Current Address:	Current Address: _____
City:	City: _____
State: _____ Zip: _____	State: _____ Zip: _____
Personal Email: _____	Personal Email: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____

Parent 2 Information

Relative 1 Information *(Must differ from all others)*

Relative 1 Name:	Relative 2 Name: _____
Current Address:	Current Address: _____
City:	City: _____
State: _____ Zip: _____	State: _____ Zip: _____
Personal Email: _____	Personal Email: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____

Relative 2 Information *(Must differ from all others)*

Other Reference 1 Information *(Must differ from all others)*

Other Ref. 1 Name:	Other Ref. 2 Name: _____
Current Address:	Current Address: _____
City:	City: _____
State: _____ Zip: _____	State: _____ Zip: _____
Personal Email: _____	Personal Email: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____

Other Reference 2 Information *(Must differ from all others)*

My signature below signifies that I confirm, to the best of my knowledge, that the information on this form is completely accurate as of the date signed. I also acknowledge that it is my responsibility to make certain my loan servicer has updated contact information.

Signature of Student Borrower: _____ Date: _____