



# Aerospace Loan Program

## 2024-25 Cosigner Loan Application

*The cosigner and the applicant—must complete this document.*  
Type or print legibly using blue or black ink. Do not use a pencil.

### Applicant's Information

Aerospace Loan Program **Applicant's Name:** \_\_\_\_\_

**Co-signers relationship** to applicant (must not be spouse): \_\_\_\_\_

### Applicant:

I am a high school graduate or obtained a GED:

Yes     No → *If no – not eligible to apply*

I have an 8th-grade level of English and math proficiency:

Yes     No → *If no – not eligible to apply*

I am a U.S. Citizen, or an eligible non-citizen, \* legally able to work in the United States, and can provide documentation upon request:

Yes     No → *If no – not eligible to apply*

\*Acceptable non-citizen status may include:

- Deferred Action for Childhood Arrivals (DACA)
- Permanent Resident (Alien Registration Receipt Card)
- Conditional Permanent Resident (I-551C)
- Arrival-Departure Record (I-94)
- Other - Designation as: Victim of Human Trafficking, Refugee, Asylum Granted, Indefinite Parole, Humanitarian Parole, Cuban-Haitian Entrant, Citizen of Republic of Palau, Citizen of Republic of the Marshal Island, Citizen of Micronesia

### Optional Information:

**Gender:** *(optional)*

Female     Male     other/no response

**Ethnicity:** *(optional)*

- American Indian or Alaskan Native
- Asian
- Black or African American
- Caucasian or White
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- More Than One Race or Multiracial

## Contact Information

Provide two contacts with addresses different from your own and different from each other who will always know your current address. The first contact should be a relative, if possible, but neither contact can be a spouse.

### Contact One:

**Last Name (Legal)** \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Initial** \_\_\_\_\_  
**Permanent Address (Street)** \_\_\_\_\_  
**City, State, Zip** \_\_\_\_\_  
**Area Code/Telephone** \_\_\_\_\_  
**Relationship to Applicant** \_\_\_\_\_  
**Email Address** \_\_\_\_\_

### Contact Two:

**Last Name (Legal)** \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Initial** \_\_\_\_\_  
**Permanent Address (Street)** \_\_\_\_\_  
**City, State, Zip** \_\_\_\_\_  
**Area Code/Telephone** \_\_\_\_\_  
**Relationship to Applicant** \_\_\_\_\_  
**Email Address** \_\_\_\_\_

## Cosigner's Information

**Last Name** (Legal) \_\_\_\_\_  
**First Name** \_\_\_\_\_  
**Middle Initial** \_\_\_\_\_  
**Social Security Number** \_\_\_\_\_  
**Mailing Address** (Street) \_\_\_\_\_  
**City, State, Zip** \_\_\_\_\_  
**Area Code/Telephone** \_\_\_\_\_  
**Birthdate** \_\_\_\_\_  
**Email Address** \_\_\_\_\_

I am a U.S. Citizen or an eligible non-citizen\* and can provide documentation upon request:

Yes       No (If no, not eligible to cosign).

\*Acceptable non-citizen status may include:

- Deferred Action for Childhood Arrivals (DACA)
- Permanent Resident (Alien Registration Receipt Card)
- Conditional Permanent Resident (I-551C)
- Arrival-Departure Record (I-94)
- Victim of Human Trafficking
- Other - Designation as Victim of Human Trafficking, Refugee, Asylum Granted, Indefinite Parole, Humanitarian Parole, Cuban-Haitian Entrant, Citizen of Republic of Palau, Citizen of Republic of the Marshal Island, Citizen of Micronesia

## Cosigner's Credit Eligibility

To be eligible to cosign, you must answer “**No**” to all the following questions:

- Are you delinquent on any federal/state debt?**       No       Yes
- Are you delinquent on child support payments?**       No       Yes
- Have you filed a bankruptcy in the last seven years?**       No       Yes
- To the best of your knowledge, is your credit score below 600?**       No       Yes
- Do you have any open collection accounts?**       No       Yes

If you cannot answer **No** to each of the above questions, you are not eligible to cosign for this loan. If you have no credit history, you cannot cosign for this loan.

## Cosigner's Approval for Credit Report and Certification

**By my signature below, I authorize the Washington Student Achievement Council to obtain a Consumer Credit Report on me.** This authorization is valid for purposes of verifying information given pursuant to the authorization of the Aerospace Loan Program or any other lawful purpose covered under the Fair Credit Reporting Act (FCRA). This authorization shall be valid in original or copy form.

By my signature below, I certify that all the information in this application is true and complete to the best of my knowledge.

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**Cosigner Signature**

**Printed Name**

**Date**

Mail to: WSAC/ALP, PO Box 43430, Olympia, WA 98504-3430  
Questions? Contact: [alp@wsac.wa.gov](mailto:alp@wsac.wa.gov) or 1-888-535-0747 (Option 6)