THE STUDENT LOAN FUND

OF

THE CONNECTICUT STATE GRANGE, INC.

APPLICATION FOR LOAN

Loan No		, Conn.
		, 20
I,	, being	years of age,
hereby apply for a loan on		
Loan Fund of the Connecticut State Grange, Ind	c. for the purpose of completing my _	year at
College.	Date of anticipated graduation	
If application is approved, I agree to abide by	all the rules and regulations set for	h by the Connecticut
State Grange, Inc., Student Loan Fund, as pres	cribed on the DEMAND NOTE.	
(Applicant's Si	gnature)	
	Address	
Endorser	PO Address	
Endorser		
We certify that above signature is genuine a		
a member in good standing of	Gran	ge No and
is deserving of the aid of this fund and believe	the endorsers are financially response	sible.
-		. Secretary
		, master
Application Approved	20	
		, Chairman
		, Secretary
		, ,

Mail this application to Chairman of Board of Trustees of this Fund or CT State Grange, 100 Newfield Road, P.O. Box 3, Winchester Center, CT 06094