



Montana Guaranteed Student Loan Program

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Customer Assistance: (800) 537-7508
www.mgslp.org

MONTANA GUARANTEED STUDENT LOAN PROGRAM MIDDLE SCHOOL ESSAY CONTEST WINNER RECIPIENT INFORMATION FORM 2007-2008

Recipient's Name _____
First Middle Last

Recipient's Social Security Number _____ Birth date _____

Recipient's Mailing Address _____

City _____ State _____ Zip Code _____

Telephone Number _____

Year Recipient Expects to Graduate from High School _____

Recipient's Parent(s) or Legal Guardian _____

Address (if different from recipient's): _____

City _____ State _____ Zip Code _____

Recipient's School _____

Release of Information

I (we) the parent(s) or legal guardian(s) of the above-named recipient

DO DO NOT
(Please circle one of the above)

give permission to the Montana Guaranteed Student Loan Program to publish the name of my (our) child who is a recipient of the essay contest first place award. The Montana Guaranteed Student Loan Program also has my permission to publish the essay written by my child and/or a photo of my child, which was submitted in the open competition to win the award.

I understand the Montana Guaranteed Student Loan Program will hold the \$200 College Scholarship in his/her name until he/she enters and eligible accredited postsecondary educational institution in the United States. The scholarship expires five years after he/she has graduated from high school. This account is not transferable to another person.

Parent or Legal Guardian Signature

Date

Printed Name of Parent or Legal Guardian

Return this form to your GEAR UP Liaison or mail to the attention of Tina Wagner, at the above address.