

# Historically Black College & University Capital Financing Program Loan Application

**WARNING:** You are completing this application to obtain Federal funds. Any person who knowingly makes a false statement or misrepresentation on this form or any accompanying documents is subject to penalties that may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

## CONTACT INFORMATION

School Name:			
Contact Name/Title:			
School Street Address:			
City/State/Zip Code:			
Contact's Phone:		Contact's Fax:	
Contact's Email Address:			

## ENROLLMENT DATA For current semester, number of applications received, accepted and current semester's enrollment. For all other years, provide Fall enrollment numbers.

Applications Received		Applications Accepted		Current Enrollment	
FTE Fall Enrollment:	2016	2015	2014	2013	2012

## FINANCIAL DATA Answer the following four questions and furnish the requested information for each year indicated.

1. If your institution's financial statements from last year were audited, then by whom?
2. If last year's financial statements have not been audited, when do you expect to complete the audit?
3. Has your institution, during the last five years, defaulted on a loan -- federal or otherwise? (Y/N)
4. Have you received Federal Grants that would require your institution to file a *Notice of Federal Interest*? (Y/N)
5. Official 3-Year Cohort Default Rate: 2012  2011  2010

	Most Recent Quarter	Fiscal Year 2016-2015	Fiscal Year 2015-2014	Fiscal Year 2014-2013	Fiscal Year 2013-2012	Fiscal Year 2012-2011
Current Year Operating Revenues						
Current Operating Expenses						
Net Revenue from Operations						
Total Revenue						
Tuition Revenue						
Auxiliary Revenue						
Unrestricted Net Assets						
Temporary Restricted Net Assets						
Permanently Restricted Net Assets						
Total Net Assets						
Market Value of Restricted Endowment						
Market Value of Unrestricted Endowment						
Value of Plant						
Estimated Deferred Maintenance						
Total Short-Term Loan Payments						
Total Debt Service Payments						
Total Direct Debt*						
Cohort Default Rate						
Total Number of Beds						

\*Capital leases, notes, bonds, commercial paper, bank loans, draws on line of credit.

**OTHER BORROWING** Please provide the requested information on all outstanding bonds and indicate by an asterisk (\*) if your institution is considering refunding those bonds through the HBCU Capital Financing Program.

Loan Amount	Include in HBCU Loan (Y/N)	Interest Rate	Maturity Date (MM/DD/YYCC)	Security and Redemption Provisions

**HBCU LOAN BORROWING** Please provide a brief project description, including the type of project, estimated cost, estimated time line, project priority and educational purpose for each project that will comprise your HBCU Loan Borrowing. If your proposed project involves renovation or construction, provide the contact information for your local historic district office as well as the name of the State Historic Preservation Office.

PROJECT 1

PROJECT 2

PROJECT 3

Please note above if you have added a page with additional information.

**CERTIFICATION** I understand that: (1) this Historically Black College and University Capital Financing Program loan application must be completed in its entirety, (2) I must supply the U.S. Department of Education's Designated Bonding Authority with the items in the attached application checklist before I can receive a decision on my application, and (3) any false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

I certify, under the penalty of perjury, that: (1) all of the information I have provided on this document and in any accompanying documentation is true and accurate, and (2) I have the authority to apply for a loan under the Historically Black College and University Capital Financing Program.

School Official's Name and Title (Printed)

School Official's Signature \_\_\_\_\_ Date \_\_\_\_\_

**WHERE TO SEND THE COMPLETED LOAN INFORMATION FORM** If you need help completing this form, you may call 404-736-3628. Submit this completed Loan Application and any supporting documentation by:

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| <p><b>PREFERRED METHOD:</b><br/> <b>Save this document as a PDF file and upload it</b> to Rice Capital Access Program using our secure upload system on the "How to Apply" page of <a href="http://www.ricecapitalaccess.net">www.ricecapitalaccess.net</a>.</p> | <p><b>US Postal Mail:</b><br/>                 Rice Capital Access Program<br/>                 Attention: Will Fisher<br/>                 1075 Peachtree St. N.E., Suite 3650<br/>                 Atlanta, Georgia 30309</p> | <p><b>Print to PDF, attach to an E-mail message and send to:</b><br/>                 Will Fisher<br/> <a href="mailto:will.fisher@ricefin.com">will.fisher@ricefin.com</a><br/> <b>Facsimile to:</b> 404-736-3629 (fax)</p> |
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Be sure to print a copy for your records. **IMPORTANT:** If you submit the form online, also mail or fax the full application with your signature within 3 days.