

Academic Year 2025-2026
JOHNS HOPKINS BLOOMBERG SCHOOL OF PUBLIC HEALTH
Financial Aid Office
615 N. Wolfe Street, Suite E1002
Baltimore, MD 21205-2179
Phone: (410) 955-3004 Fax: (410) 367-2161

Clear Form

Print Form

[Student Case Management](#)

Private Education Loan Application

This application is for students who want to apply for alternative loans from private lending institutions and do not wish to or cannot complete the Federal Financial Aid application process. International students, students classified as special student limited, and students enrolled on a less-than-half-time basis (1-5 credits per term) are eligible to apply for alternative loans. You can locate potential lenders by searching the JHU Elm Select website or by searching the internet for private education loans. You must use our school code (002077-05) when you apply. Submit this form to the Financial Aid Office after your loan has been approved by your lender.

Name _____

Current Address _____
(Street) (City) (State) (Zip)

E-Mail Address _____ Telephone Number (_____) _____

Department _____ Degree Program _____

Lender's Name: _____ Loan Amount \$ _____

YOUR LOAN WILL BE CERTIFIED FOR THE ENTIRE PERIOD OF YOUR ENROLLMENT AND FUNDS WILL BE EQUALLY DISBURSED PER TERM. MOST LENDERS PERMIT A MAXIMUM OF FOUR DISBURSEMENTS.

Enrollment Periods	Enrollment Period Dates	Anticipated Credits Per Term	Alternate Distribution Request
Summer Institute	05/26/2025 - 08/22/2025	Choose # of credits:	\$
Summer Term	06/30/2025 - 08/22/2025	Choose # of credits:	\$
1 st Term	08/25/2025 - 10/20/2025	Choose # of credits:	\$
2 nd Term	10/22/2025 - 12/19/2025	Choose # of credits:	\$
Winter Intersession	01/02/2026 - 01/19/2026	Choose # of credits:	\$
3 rd Term	01/20/2026 - 03/16/2026	Choose # of credits:	\$
4 th Term	03/23/2026 - 05/15/2026	Choose # of credits:	\$
Total:			\$

Will you receive financial support (tuition, insurance, or fees) from the School or your academic department in 2025-2026?

Yes/No _____ If yes, list amount or percentage of financial support per year: \$ _____

Will you receive financial support such as a scholarship or grant from an outside agency in 2025-2026? Yes/No _____

If yes, list the source and the amount. Include any aid not previously listed on this form. Do not include stipends.

_____ \$ _____

Will you receive employer tuition assistance from JHU/JHH or other employment to use toward your education costs? Yes/No _____

If yes, list the source and the amount. _____ \$ _____

*SIGNATURE (REQUIRED)

DATE (MM/DD/YYYY)

Submit to: [Student Case Management](#)