



CAMDEN COUNTY COLLEGE
Emergency Calculator Loan Program
856-227-7200 ext. 4411

(PLEASE PRINT)

LAST NAME FIRST NAME College ID#

STREET ADDRESS

CITY STATE NJ ZIP CODE

HOME PHONE BUSINESS PHONE

Email: GPA:

Financial Aid: Yes or No

Who referred you to this program?

Reason for Calculator loan request:

Multiple horizontal lines for text entry.

AGREEMENT NOTICE --

By signing this agreement, you are acknowledging that this calculator is the property of Camden County College Department of Student Services and must be returned to the Tutoring Center, Taft Hall 107 by the end of the semester.

Replacement Fees:

Note by signing this agreement you agree to return the calculator to the Tutoring Center by the end of the semester or you will be responsible for the cost of the calculator (\$149.00) a bill will be submitted to the business office and a Student Affairs hold will be placed on your student account till the bill is paid!

SIGNATURE DATE

Approved: Denied: Reason:

Thank you for being part of this Student Success Initiative. Have a great semester!