

Instructions for FSA 2301

REQUEST FOR YOUTH LOAN

Youth loan applicants use this form to apply for direct loan assistance from FSA.

Submit the original completed form in hard copy or a facsimile copy to the appropriate county FSA office. Applicants who have established electronic access credentials with USDA may electronically transmit this form to the USDA servicing office. The application will be processed; however, the original, signed copy of the form must be submitted to the USDA office before FSA can take final action on the application. Features for transmitting the form electronically are available to those customers with access credentials only. If you would like to establish online access credentials with USDA, follow the instructions provided at the USDA eForms web site.

Applicants must complete Part A.

Project advisor must complete Part B.

Parent or guardian must complete Part C.

Part D is for FSA use only.

PART A, Items 1-40B are completed by the applicant, except item 19D is for FSA use only.

Fld Name / Item No.	Instruction
1 Exact Full Legal Name	Enter the applicant's exact full legal name.
2 Address	Enter applicant's complete mailing address, including physical address if different from mailing address.
3 County of Project	Enter the County where the project will be performed.
4 Social Security No.	Enter applicant's social security number.
5 Birth Date	Enter applicant's date of birth.
6 Telephone Number	Enter applicant's contact telephone numbers, including area code.

Fld Name / Item No.	Instruction
7 Marital Status	Enter check in the appropriate box for marital status.
8 Amount of Loan Request	Enter the loan amount being requested.
9 Citizenship	Check "YES" if you are a U.S. citizen. Check "NO" if a U.S. non-citizen national or qualified alien and provide appropriate documentation of immigration status.
10 Previous FSA Assistance	Check "YES" if you ever obtained a direct or guaranteed loan from FSA; if not, check "NO".
11 Delinquent on Federal Debt	Check "YES" if you are delinquent on any federal debt and provide an explanation in Item 17. (Federal debt includes but is not limited to education loans, delinquent taxes, obligations at Natural Resources Conservation Service, etc.) Otherwise check "NO."
12 Debt Forgiveness	Check "YES" if the government ever forgave any debt on an FSA direct or guaranteed loan through a write-off, debt settlement, compromise, write-down, charge-off, adjustment, reduction or bankruptcy and provide an explanation in Item 17. If not, check "NO".
13 Employment Information	Check "YES" if employed and enter the name, mailing address and telephone number of the employer. Also provide the annual income and if employment is full or part time in Item 17. If not employed, check "NO".
14 Employee Relationship	Check "YES" if you are an employee, related to an employee, or closely associated with an employee of the Farm Service Agency, and provide an explanation in Item 17. If not, check "NO".
15 Agriculture Related Organization	Check "YES" if you are an active member of FFA, 4-H or other agriculture related organization. Provide the name of the organization that will sponsor you for this project in Item 18. If not, check "NO".
16 Veteran	Check "YES" if you are a veteran. If not, check "NO".
17 Additional Answers	Use this space to provide additional answers to questions on this application.
18 Brief Description of Project	Provide a brief description of your proposed project.

Fld Name / Item No.	Instruction
19A Ethnicity	Check the appropriate box indicating the individual applicant's ethnicity.
19B Race	Check the appropriate boxes indicating the individual applicant's race.
19C Gender	Check the appropriate box indicating the individual applicant's gender.

Item 19D is for FSA use only.

Fld Name / Item No.	Instruction
20A Income Description	Enter the description of each source of income.
20B \$ Amount	Enter the annual dollar amount of income received from each source described.
21 Total	Enter the total annual dollar amount of income from all sources listed under Item 19B.
22A Expense Description	Enter the description for each expense.
22B \$ Amount	Enter the annual dollar amount of each expense described.
23 Total	Enter the total annual dollar amount of all expenses listed under Item 21B.
24 Annual Total Income	Enter the total annual dollar amount of income from Item 20.
25 Annual Total Expenses	Enter the total annual dollar amount of all expenses from Item 22.
26 Annual Amount of Payments Due	Enter the estimated annual dollar amount of payments due, including requested loan.
27 Ending Cash Balance	Subtract Item 24 "Annual Total Expenses" and 25 "Annual Amount of Payments Due" from Item 23 "Annual Total Income" to complete Item 26 "Ending Cash Balance".
28A Assets Description	Enter a description of all assets.

Fld Name / Item No.	Instruction
28B \$ Amount	Enter the dollar value of each asset described.
29 Total Assets	Enter the total dollar value of all assets described.
30A Debts Description	Enter a description of all debts.
30B \$ Amount	Enter the dollar amount of each debt described.
31 Total Debts	Enter the total dollar amount of all debts described.
32 Total Assets	Enter the dollar amount of total assets from Item 28.
33 Total Debts	Enter the dollar amount of total debts from Item 30.
34 Net Worth	Enter the net worth by subtracting Item 32 from Item 31.
35 Special Program Information	Please read.
36 Statement Required by Privacy Act	Please Read.
37 General Information	Please read.
38 Certifications	Please read.
39 Warning	Please read.
40A Signature	<p>Enter the applicant's signature.</p> <p>If you are mailing or faxing this form, print the form and manually enter your signature. If you have established credentials with USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office. The application will be processed; however, the original, signed copy of the form must be submitted to the USDA office before FSA can take final action on the application.</p>

Fld Name / Item No.	Instruction
40B Date	Enter the date applicant signed.

PART B - All items are completed by the project advisor

Fld Name / Item No.	Instruction
41A Project Advisor Recommendation	Enter a brief description of how you plan to assist the applicant.
41B Name	Print the project advisor's name
41C Signature	Enter the project advisor's signature. If you are mailing or faxing this form, print the form and manually enter your signature. If you have established credentials with USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office. The application will be processed; however, the original, signed copy of the form must be submitted to the USDA office before FSA can take final action on the application.
41D Phone Number	Enter the contact phone number for the project advisor.
41E Date	Enter the date the project advisor signed.

PART C - All items are completed by the parent or guardian

Fld Name / Item No.	Instruction
42A Parent or Guardian Acknowledgment	Enter a brief description of how you plan to assist the applicant.
42B Name	Print the parent or guardian name.
42C Signature	Enter the parent or guardian's signature. If you are mailing or faxing this form, print the form and manually enter your signature. If you have established credentials with USDA to submit forms electronically, use the buttons provided on the form

Fld Name / Item No.	Instruction
	for transmitting the form to the USDA servicing office. The application will be processed; however, the original, signed copy of the form must be submitted to the USDA office before FSA can take final action on the application.
42D Date	Enter the date the parent or guardian signed.

PART D is for FSA use only.