

**REQUEST FOR YOUTH LOAN
INSTRUCTIONS FOR PREPARATION**

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| Purpose: This form used by youth loan applicants to apply for direct loan assistance from FSA. | |
| Handbook Reference: 3-FLP | Number of Copies: Original |
| Signatures Required: Applicant, Project Advisor, and Parent/Guardian. | |
| Distribution of Copies: Retained in the case file. | |
| Automation-Related Transactions: (Instructions for writers: provide only the information required, i.e. ADPS TC 3K. If no automation actions are required, insert N/A FBP, DLS, | |

***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.

| Fld Name / Item No. | Instruction |
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| 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 Email Address | Enter the applicant’s email address. |
| 5 Social Security No. | Enter applicant’s social security number. |
| 6 Birth Date | Enter applicant’s date of birth. |
| 7 Telephone Number | Enter applicant’s contact telephone numbers, including area code. |
| 8 Marital Status | Enter check in the appropriate box for marital status. |
| 9 Amount of Loan Request | Enter the loan amount being requested. |
| 10 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. |
| 11 | Check “YES” if you ever obtained a direct or guaranteed loan from FSA; if not, |

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| Previous FSA Assistance | check "NO". |
| 12 Delinquent on Federal Debt | Check "YES" if you are delinquent on any federal debt and provide an explanation in Item 18. (Federal debt includes but is not limited to education loans, delinquent taxes, obligations at Natural Resources Conservation Service, etc.) Otherwise check "'NO." |
| 13 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 18. If not, check "NO". |
| 14 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 18. If not employed, check "NO". |
| 15 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 18. If not, check "NO". |
| 16 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". |
| 17 Veteran | Check "YES" if you are a veteran. If not, check "NO". |
| 18 Additional Answers | Use this space to provide additional answers to questions on this application. |
| 19 Brief Description of Project | Provide a brief description of your proposed project. |
| 20A Ethnicity | Check the appropriate box indicating the individual applicant's ethnicity. |
| 20B Race | Check the appropriate boxes indicating the individual applicant's race. |
| 20C Gender | Check the appropriate box indicating the individual applicant's gender. |
| 21A Income Description | Enter the description of each projected source of income. |
| 21B \$ Amount | Enter the projected annual dollar amount of income received from each source described. |
| 22 Total | Enter the projected total annual dollar amount of income from all sources listed under Item 21A. |
| 23A Expense Description | Enter the description for each projected expense. |

| Fld Name / Item No. | Instruction |
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| 23B \$Amount | Enter the projected annual dollar amount of each expense described. |
| 24 Total | Enter the projected total annual dollar amount of all expenses listed under Item 23A. |
| 25 Annual Total Income | Enter the projected total annual dollar amount of income from Item 22. |
| 26 Annual Total Expenses | Enter the projected total annual dollar amount of all expenses from Item 24. |
| 27 Annual Amount of Payments Due | Enter the estimated annual dollar amount of payments due, including requested loan. |
| 28 Ending Cash Balance | Subtract Item 26 “Annual Total Expenses” and 27 “Annual Amount of Payments Due” from Item 25 “Annual Total Income” to complete Item 28 “Ending Cash Balance”. |
| 29A Assets Description | Enter a description of all assets. |
| 29B \$ Amount | Enter the dollar value of each asset described. |
| 30 Total Assets | Enter the total dollar value of all assets described. |
| 31A Debts Description | Enter a description of all debts. |
| 31B \$ Amount | Enter the dollar amount of each debt described. |
| 32 Total Debts | Enter the total dollar amount of all debts described. |
| 33 Total Assets | Enter the dollar amount of total assets from Item 30. |
| 34 Total Debts | Enter the dollar amount of total debts from Item 32. |
| 35 Net Worth | Enter the net worth by subtracting Item 34 from Item 33. |
| 36 Special Program Information | Please read. |
| 37 General Information | Please read. |
| 38 Certifications | Please read. |
| 39 Warning | Please read. |
| 40A Signature | Enter the applicant’s signature. |

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

PART B - All items are completed by the project advisor.

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| 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. |
| 41D Title Within Organization | Enter project advisor's title within the organization (leader, advisor, teacher, County Extension agent, etc.). |
| 41E Organizational Affiliation | Enter the name of agricultural organization with which project advisor is associated. |
| 41F Phone Number | Enter the contact phone number for the project advisor. |
| 41G Date | Enter the date the project advisor signed. |

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

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| 42A Parent or Guardian Recommendation | 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. |
| 42D Date | Enter the date the parent or guardian signed. |

PART D- All items are completed FSA.

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| 43A Date Form Received | Enter the date the FSA 2301 received in the Office. |
| 43B Date Application Complete | Enter the date the application is considered complete. |
| 43C Credit Report Fee | Enter the amount of the credit report fee. (For applicants 18 years or older). |
| 43D Date Received | Enter the date the credit report fee is received. |
| 43E Agency Official | Enter the name of the Agency Official receiving the application. |