

• CAYUGA COMMUNITY COLLEGE •

Financial Aid Office • 197 Franklin Street, Auburn, NY 13021
Auburn 315-255-1743 ext. 2470 • Fulton 315-592-4143 ext. 3004 • FAX 315-252-2185

REQUEST FOR FEDERAL DIRECT PLUS LOAN

The Federal Direct Parent Loan for Undergraduate Students (PLUS) is a non-need based federal loan program. The lender is the U.S. Department of Education rather than a bank or credit union. If you are interested in borrowing a William D. Ford Federal Direct PLUS Loan, please complete this form and return it to the Financial Aid Office. **By completing this form I authorize Cayuga Community College to perform a credit check.**

To BE COMPLETED BY THE PARENT BORROWER:

Parent Name _____ Soc. Sec. No. _____

Address _____
Street City State Zip Code

Home Phone No. _____ Date of Birth _____

Parent email address _____

Check one: _____ U.S. Citizen _____ Eligible Non-Citizen (Alien Registration Number _____)

Driver's License: State _____ # _____

Relationship to Student (check one): _____ Father _____ Mother _____ Stepparent _____

Total Amount you wish to Borrow \$ _____

Are you in default on a student loan? (circle one) Yes No

Loan Period - Please Check One: If you will be borrowing for both the Fall and Spring semesters, we recommend that you apply for Fall and Spring loans at the same time. PLUS Loans for one semester only will require multiple disbursements, and half of the funds will not be available until after the midpoint of the semester.

Fall 20__ (1/2) and Spring 20__ (1/2)

Spring 20__ Only

Master Promissory Note (MPN):

_____ I have signed a MPN online at <https://studentloans.gov> ____/____/____.

_____ I have a Federal Direct Loan MPN on file from a prior year

I, the parent borrower, authorize the Financial Aid Office at Cayuga Community College to apply all PLUS funds to any charges on the student's account including tuition, fees, bookstore charges and any other charges that the student may authorize or cause to be assessed against the student account. I confirm that I am not in default on a federal student loan. All funds in excess of the student bill will be refunded.

I do _____/ do not _____ give permission to have excess PLUS proceeds released to the student.

Parent Signature

Date

To BE COMPLETED BY STUDENT:

NAME _____ SOC. SEC. NO. _____

Banner ID # _____ DATE OF BIRTH _____

OFFICE USE ONLY

Approved Amount _____ Date Loan Originated _____ Loan Period _____ FA Initials _____