



Financial Aid Office
579 College Way
Urbana, OH 43078
(937) 484-1355
FAX: (937) 484-1342
Email: financialaid@urbana.edu

2012-2013 FEDERAL PLUS LOAN REQUEST FORM

STUDENT INFORMATION:

Student Name: Student Social Security Number:

Student Date of Birth: Driver's License State and Number:

PARENT INFORMATION:

Parent Borrower Name: Social Security Number:

Parent Borrower Permanent Street Address:

City: State: Zip Code:

Phone Number: () Date of Birth:

State of Legal Residency: Resident Since: Is Parent Legal US Resident? Y N

Parent Driver License Number: State

Parent email address to verify disbursement information:

Is the parent borrower the student's natural or adoptive parent OR the spouse of the student's parent or legal guardian? Y N

Are you currently in default on a federal education loan, or do you owe a refund on a federal student grant? Y N

I would like to borrow:

the amount shown on the award letter

other amount \$

To process the Federal Direct PLUS Loan for you, we need some additional information regarding the disbursement of funds. Registration and continued eligibility of the student must be verified before the University is permitted to place these funds on the student's account. After the student's enrollment is confirmed and funds are disbursed to the account to pay tuition, lab fees, insurance, books, supplies and other education-related charges. We need to know what you want us to do with proceeds that may remain after the account is paid in full. Please indicate on this form your wishes, sign and date the form, and return this form to us for processing. Please check the following option you choose should there be excess funds remaining after the PLUS loan is applied to the student's account:

Retain excess funds on the student's account. I understand that the student may withdraw proceeds for personal expenses once per semester.

Return excess funds to me (the parent borrower) at the following address:

Address lines for return of excess funds

You have 30 days from disbursement of this loan to lower or cancel this loan. By lowering or cancelling this loan, you understand that if a balance on the student account is created, your student is responsible for paying the balance due immediately. I certify that all of the information above is accurate and complete. I also understand that this loan request form gives Urbana University's Financial Aid Office to process a loan in my name and my credit report will be accessed by the US Department of Education to finalize this transaction.

Parent Signature & Date: