## University of Illinois Springfield – Office of Financial Assistance One University Plaza, MS UHB 1015 -- Springfield, Illinois 62703-5407 -- Phone: (217) 206-6724

## 2015-2016 Federal Direct Plus Loan Application

## PLEASE NOTE: Incomplete or incorrect information will delay processing (Please print clearly).

1A. Student Name:			1B. Stu	1B. Student UIN:		
2.	Parent Full Legal Name:					
		ast	First		MI	
3A.	Parent Social Security Number: 3B. Parent Date of Birth:					
4.	Parent Home Address:Street		City	State	ZIP	
5.		_)		State	ZIF	
6.	Parent Driver's License Number:		Sta	ite of Issuance:		
7.	Parent U.S. Citizenship Status (check one	e):				
	U.S. Citizen or National	izen or National  Permanent Resident or other eligible alien* *You must submit an 8 ½ x 11 copy of your alien registration or green card with the students UIN listed.				
8.	Are you (parent borrower) currently in default (default means you have failed to make payments) on a federal education loan or owe a refund on a federal student grant? Please <b>check one</b> : Yes No					
9.	In the event your PLUS loan is denied due to the results of your credit check, I would like to (check one):					
	<ul> <li>Use an Endorser/Credit-worthy Co-Signer</li> </ul>	□ Allow the student to Federal Direct Unst	be considered for a ubsidized Stafford Lc		□ Take no further action	
	**If the student is a freshman or sophomore they are eligible for \$6000 and junior and seniors are eligible for \$7000.					
10. Please indicate the <i>dollar amount</i> of the PLUS Loan you are requesting: \$ (please indicate <i>full year</i> amount).						
11.	Refund Information: PLUS loan funds are applied to University charges prior to any student aid. If any loan funds remain on the University student account AFTER all charges have been paid, I authorize the refund to be sent to ( <b>check one</b> ):					
	□ Student □ Parent					
Parent & Student Signature Enter Student "UIN" in Boxes Below						
I certify that I am the parent of the student for which the PLUS loan funds are being requested. By signing this application I am accepting the PLUS Loan, and I authorize the University of Illinois at Springfield to send the above information to the Direct Loan Processing Center to conduct a credit check. If the credit check is approved, and an active MPN is on file, the loan funds will be credited to my student's University Account for payment of tuition, fees, and other charges.						
Boi	rrower's (Parent) Signature Date		Student's Signatur	е	Date	
IMF	PORTANT:       1. Return this form to the 0 completed and that the         2. Please be aware that the you have not already co         3. If you like to learn more	appropriate people ha e parent borrower liste mpleted one, you may	ve signed (above). ed above must also ⁄ do so at <u>https://st</u>	have a Master P udentloans.gov.	romissory Note on file. If	
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