



## Federal Direct PLUS Loan Application Notification and Funds Release

FCXXPLRQ

| STUDENT INFORMATION   |  |  |
|---|--|--|
| ame Student ID Number   |  | D Number   |
| PARENT INFORMATION  |  |  |
| Name SS   |  |  |
| To apply for a PLUS loan, the borrower must be are considered on the FAFSA) of a dependent  |  | stepparent (if stepparent's income and assets  |
| The PLUS Application must be completed by p<br>You, the parent, will need your U. S. Departme   |  |  |
| PARENT—COMPLETE THE FOLLOWING I, the parent, have completed tasks one through   | gh three, if applicable, online:   |  |
| ☐ The PLUS loan application online at   | t studentaid.gov   |  |
| ☐ A PLUS Master Promissory Note at  | studentaid.gov   |  |
| ☐ Annual Student Loan Acknowledge (Required each year a new federal student to  | ment with the Dept. of Education at student oan is accepted.)  | taid.gov   |
| □ A PLUS Loan Counseling at students     (Required for applicants who are determined by documenting extenuating circumstances or a students.)   | d to have an adverse credit history but who qualify for c  | ı Direct PLUS Loan   |
| ☐ Amount Requested for PLUS Loan  | \$ (divided equal  | y for terms indicated below)   |
| STUDENT—COMPLETE THE FOLLOWING  | <b>;</b>   |  |
| l, the student, plan to be enrolled in and want semester you would like the funding applied):   | the amount above to be split between (indi-  | cate the registered or anticipated credit hours for each   |
| <u>Summer 2023</u>  | Fall 2023  | Spring 2024  |
| STUDENT CERTIFICATION  I certify that I have read the Office of Financia aid applicant/recipient. I understand and will Edison State Office of Financial Aid. I authoriz Edison. I further understand that if a credit be Additionally, I authorize Edison State Community process this loan application. | abide by the requirements and regulations<br>te my student to use the loan funds for on-calance results from the PLUS loan, I authoriz | of each financial aid program and of the ampus charges that they has incurred at e my student to receive the refund. |
| Parent Borrower Signature   |  | Date   |
| Student Signature   |  | Date   |