PLUS (Parent Loan) Request Form 2019-2020

Name: ACC Student ID#:			
B. PARENT BORROWER INFORMATION			
Parent Name:	SSN:		
Date of BirthPhone Number	Driver's License (state, #)		
Permanent Home Address	City	State	Zip Code
Are you a US Citizen? Yes No If no, Alien F	Registration #: _		
Are you currently in default on a Federal Education Lo	oan? Yes	No	
Amount requested for a Direct Parent PLUS Loan on b	ehalf of the stu	ident above:	
Check the periods for which the loan is being request. Fall 2019 Spring 2 *Note: One-term only loans will be divided into two disc. C. SIGNATURE	020		Summer 2020 ne delivery of the funds
 I understand that I must complete a Direct PLUS Los Promissory Note at www.studentloans.gov before the I understand that the student must meet all eligibility but not limited to: The student must be enrolled for a minimute on the US Department of Education and its information in determining my approval of a Direct Fill understand that if it is determined I have an advers me information on obtaining an endorser. I understand that if there is a credit balance in the stable been paid, this credit balance will be refunded to the may be issued directly to me as the borrower, and the Office of Financial Aid prior to the disbursement of the take an additional 21 days to be released. I commit to use any Parent PLUS Loan money received Arapahoe Community College. 	an Application (winy request will be a requirements to more six credit howeverses of his/her cagents obtaining a rarent PLUS Loan. The credit history, the nd that if I am unabsidized Loan up to the student's tuition acceptation of the student's refundant in order to do so the funds. I understand	ith a credit che e processed. receive a Pare urs for each of cost of attenda a report of my ne Federal Dire able to obtain a co an independ count after the preference. I us to I must send tand that check	nt PLUS Loan, including the semester(s) requested. nce budget. credit record and that ct Loan program will send an endorser, the student ent student's loan limit in institutional charges have understand that this refund a request in writing to ACC ks sent to the parent can

Arapahoe Community College Office of Financial Aid ● 5900 S. Santa Fe Drive Littleton, CO 80120 Phone: 303.797.5661 • Fax: 303.797.5663 • Email: finaid@arapahoe.edu

Date

Parent Signature

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