



FEDERAL DIRECT PARENT PLUS LOAN REQUEST APPLICATION

I. Student Information

Student Name

(first) (middle) (last)

Student's SSN: _____ - _____ - _____

Loan Amount Requested \$ _____ (if left blank, the **maximum** amount of loan will be processed)

Which term are you applying this loan for (please circle one):

Fall

Spring

Summer

A Parent may apply for a PLUS loan up to the cost of attendance minus all other financial aid. If the PLUS is for one semester only, the amount that a parent may borrow is based on the cost of attendance for that semester minus the financial aid for that semester. The interest rate is fixed at 7.9%. Interest is charged from the date of the first disbursement until the loan is paid in full. The parent will pay a fee of 4% of the loan amount, deducted proportionately each time a loan disbursement is made.

II. Parent Section

Parent Social Security Number _____ - _____ - _____ U.S. Citizen: Yes ___ No ___

Parent Name

(first) (middle) (last)

Street Address _____

City _____ State _____ Zip Code _____

Parent Birth date (mm/dd/yyyy) _____ / _____ / _____

Home Telephone _____ - _____ - _____

Email Address _____

þ You must be the parent/step-parent of the student whose information is reported on the FAFSA. (**Guardians & grandparents cannot apply.**)

þ File the Free Application for Federal Student Aid (FAFSA) with the Department of Education

þ Sign the electronic Parent PLUS Master Promissory Note (eMPN) at the Department of Education's website at <http://dlenote.ed.gov>. You must have your Department of Education Personal Identification Number (PIN) to sign the Parent PLUS eMPN. This is the same PIN that you use to sign your student's FAFSA. The signature process is complete once you can view the screen that indicates SUCCESS! *Now Print your MPN.*

III. Refund Authorization

_____ I authorize the Student Accounts Receivable Office to issue any refund generated from the disbursement of the Federal Parent PLUS Loan to the student beneficiary.

(Please continue to the second page)



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IV. Parent Signature

I certify that I am the parent/step-parent of the student on this application and that all information provided on this form is accurate. I consent to the U.S. Department of Education and its agents obtaining a report of my credit record and using the information from that report in determining whether to make a Direct PLUS Loan to me. I understand that I will be notified in writing of the results of the credit check with respect to my loan application.

Parent Signature _____ Date _____

V. Authorization to Increase Unsubsidized Loans

In the event that the parent is denied the Federal Direct Parent PLUS Loan, the student may be eligible for an additional Stafford Unsubsidized Loan; up to \$4,000 as a freshman/sophomore or \$5,000 as a junior/senior. I acknowledge that by signing this form, I am authorizing the request for additional unsubsidized loans to the fullest value possible, but will not exceed the expected cost of attendance.

Student Signature _____ Date _____

Please return this form to:

National Hispanic University
Attn: Office of Financial Aid
14271 Story Road
San Jose, CA 95127

You may also submit this application in person during normal business hours.

***** This form will be returned if any item is incomplete or not legible*****