

2020-2021 Federal Direct Parent PLUS Loan Authorization Form

The purpose of this form is to grant Dominican University permission to access your electronic request for a Direct PLUS Loan and credit check, which must be completed at https://studentaid.gov. To be eligible for the PLUS loan, the student must be enrolled in a degree-seeking program for at least six credit hours each semester of the loan period. *Note: Federal regulations do not allow PLUS loan requests to be processed for an outstanding balance that is associated with an academic year that has ended.*

- 1. Complete all information requested on this form and return it to the Financial Aid Office.
- 2. The parent borrower must electronically Apply for a Parent PLUS Loan (including credit check) online at https://studentaid.gov.
- 3. All first time Federal Direct Parent PLUS Loan borrowers must complete a Master Promissory Note for the Parent PLUS Loan at https://studentaid.gov. The parent borrower will be required to use his/her U.S. Department of Education issued FSA ID to complete the Master Promissory Note for the Parent PLUS Loan as well as Apply for a Direct PLUS Loan (including credit check). Parents who do not have a parent FSA ID or cannot recall their FSA ID should go to https://studentaid.gov to request one.

| Student Information: | | | | |
|-------------------------------|---------------------------------|----------------------|-------------------------------|--------------|
| Last Name | First Name | | Student ID Number | |
| Parent Borrower Informati | ion: | | | |
| Last Name | First Name | | Middle Initial | |
| Street Address | | | | |
| City | State | Zip Code | Phone Number | |
| Parent Social Security # | | Parei | nt Date of Birth:/ | / |
| Parent Email Address | | | | |
| Parent Citizenship Status (ch | eck one) | | | |
| U.S. Citizen | | | | |
| Permanent Resident (| must include Alien Registration | on # |) | |
| Other Eligible Non-C | Citizen (please describe status | |) | |
| | | | | |
| Should the student's account | show a credit when the PLUS | S loan is disbursed. | , the refund should be issued | to (check on |
| Parent | | | | |
| Student | | | | |

I request that Dominican University process a Direct PLUS Loan for the 2020-2021 academic year.

| FULL-YEAR loan amount requested (whole dollar amount - do not inc | ndicate "maximum" or leave blank): \$ | * | | | | |
|---|---|-----|--|--|--|--|
| * The loan amount requested will be applied to the entire academic year in a plans to enroll for both the fall and spring semesters, the total loan amount Students who are graduating in fall (or starting in spring) will have the loan The maximum loan amount is the student's annual cost of attendance but interest, you pay a loan origination fee that is a percentage of the princip U.S. Department of Education deducts this fee before you receive any loan less than the amount you have to repay. | ant will be disbursed equally between the two semesters. oan funds disbursed during their one term of enrollment. adget MINUS other financial assistance. In addition to ipal amount of each Direct PLUS Loan that you receive. | The | | | | |
| We, the parent borrower and student , certify we will use any federal fund application solely for expenses related to attendance at Dominican Universi student loans or have made satisfactory arrangements to repay them and will loan. | sity. We also certify that we are not in default on any feder | | | | | |
| Consent to Obtain Credit Report | | | | | | |
| t, the parent borrower , consent to allow the U.S. Department of Education and its agents to obtain a report of my credit record and use the information from that report in determining whether to approve a Direct PLUS Loan for me. I understand that I will be notified in writing by Direct Loans of the results of the credit check with respect to my loan application. | | | | | | |
| In the event the PLUS Loan request is denied due to the results of the credit Use an endorser/creditworthy co-signer | lit check, we would like to (check one): | | | | | |
| Award the student additional Unsubsidized Stafford Loan funds (up to \$4,000 freshman/sophomore; up to \$5,000 junior/senior) | | | | | | |
| By signing this form, we acknowledge that we have read and understand all | ll information provided. | | | | | |
| Parent Borrower Signature (not typed name) | Date | | | | | |
| Student Signature (not typed name) | Date | | | | | |

Privacy Act Disclosure Notice

The Privacy Act of 1974 (5 U.S.C.552a) requires that the following notice be provided to you. The authority for collecting the information requested on this form is 451 et seq. of the Higher Education Act of 1965, as amended. Your disclosure of this information is voluntary. However, if you do not provide this information, you cannot be considered for a Direct PLUS Loan. The information on this form will be used to determine your eligibility for a Direct PLUS Loan. The information in your file may be disclosed to third parties as authorized under routine uses in the Privacy Act notices called "Title IV Program Files" (originally published on April 12, 2004, Federal Register, Vol 59 p. 17351) and "National Student Loan Data System" (originally published on December 20, 1994, Federal Register, Vol 59 p. 65532). Thus, this information may be disclosed to federal and state agencies, private parties such as relatives, present and former employers and creditors, and contractors of the Department of Education for purposes of administration of the student financial assistance program, for enforcement purposes, for litigation where such disclosure is compatible with the purposes for which the records were collected, for use by federal, state, local, or foreign agencies in connection with employment matters or the issuance of a license, grant, or other benefit, for use in any employee grievance or discipline proceeding in which the Federal Government is a party, for use in connection with audits or other investigations, for research purposes, for purposes of determining where particular records are required to be disclosed under the Freedom of Information Act, and to a Member of Congress in response to an inquiry from the congressional office made at your written request. Because we request your social security number (SSN), we must inform you that we collect your SSN on a voluntary basis but section 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) provides that, in order to receive any grant, loan or work assistance under Ti