

## 2017-2018 Direct Student Loan Request Form

### Section I: Student Information

Name: \_\_\_\_\_ MCA/SSN I.D. #: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please complete **Section II** if you will be applying for a Federal Direct Loan. Refer to your Award Letter in the middle section titled **“Your financial package.”**

### Section II: Federal Direct Loan Request

To be eligible, you must first complete the Free Application for Federal Student Aid (FAFSA) at [www.fafsa.gov](http://www.fafsa.gov). New borrowers must complete an electronic Master Promissory Note (eMPN) and Entrance Counseling on [studentloans.gov](http://studentloans.gov) before loans can be disbursed.

*Please note that the maximum annual amount of your loan has been listed on your award letter. Loans are typically set up for an academic year so the annual amount should be considered if a change in loan amount is required.*

#### Direct Subsidized Loans:

- I would like to process my Subsidized Loan for the maximum amount listed on my award letter.
- I would like to process my Subsidized Loan for less than the maximum amount. Process my loan for \$ \_\_\_\_\_ .

#### Direct Unsubsidized Loans:

- I would like to process my Unsubsidized Loan for the maximum amount listed on my award letter.
- I would like to process my Unsubsidized Loan for less than the maximum. Process my loan for \$ \_\_\_\_\_ .

#### Direct Parent PLUS & Graduate PLUS Loan:

- I would like to process my PLUS Loan for the maximum amount listed on my award letter.
- I would like to process my PLUS Loan for less than the maximum. Process my loan for \$ \_\_\_\_\_ .

## Section III: Consent to Obtain Credit Report for Parent PLUS & Graduate PLUS Loans

This section is for the parents of an undergraduate students and students pursuing a graduate degree to complete.

### PARENT OF UNDERGRADUATE STUDENT OR GRADUATE STUDENT BORROWER INFORMATION

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Permanent Address: \_\_\_\_\_ Relation to Student: *Select one option.*

\_\_\_\_\_  
 Parent  Legal Guardian

\_\_\_\_\_  
 Non-custodial Parent  Graduate Student

Net Amount to Borrow: \$ \_\_\_\_\_ Terms:  BOTH  FALL 2016 ONLY  SPRING 2017 ONLY

*Select the terms you desire to use PLUS funds.*

**Please note** that by signing this form, you are authorizing the U.S. Department of Education (USDE) to investigate your credit record. The Direct PLUS loan will show as an anticipated credit on the student's billing account when the loan is preapproved by USDE and the master promissory note (MPN) has been signed.

Parent/Graduate Signature: \_\_\_\_\_ 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, 1994, 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 whether 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 we collect your SSN on a voluntary basis, but section 484(i)(4) of the HEA (20 U.S.C. 101(A)(4)) provides that, in order to receive any grant, loan, or work assistance under Title IV of the HEA, a student must provide his or her SSN. Your SSN is used to verify your identity, and as an account number (identifier) throughout the life of your loan(s) so that data may be recorded accurately.

### CERTIFICATION

**Signature of both student and parent (if dependent) is required. I certify that the above information is correct. If I purposely give false or misleading information, I may be fined \$20,000, sent to prison, or both.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_