

**2009-2010
PLUS LOAN
REQUEST FORM**

Directions: In order to obtain a Federal Direct Parent Loan for Undergraduate Students (PLUS), you will need to complete all of the information on this form and return it to the Financial Aid Office. Parents may borrow up to the Cost of Attendance minus other financial aid. Your loan request will be reduced if you request funds in excess of what you are eligible to receive. When deciding the amount you wish to request, please remember that all Plus Loans have a 4% origination fee deducted from the principle amount. If you are eligible for the PLUS Loan, and you have not previously borrowed from this program, the information for a master promissory note will be sent to the address below.

Requested Loan Amount: \$ _____ **Loan Period:** 09/10 Acad Yr Fall 09 Spring 10 Summer 10
*Please mark ONE only

STUDENT SECTION

Student Name: _____ **Date of Birth:** ____/____/____
Last First MI Mo Day Yr
ID#: _____ **SS#:** _____ Male Female

Have you applied or will you be applying for financial aid through FAFSA?

Yes No; If No, you **must** complete the *Student Eligibility* section on the reverse side of this form.

PARENT SECTION (Please list only one parent's information)

Parent Name: _____ **SS#:** _____
Last First MI
Relationship to Student: Mother Father **Date of Birth:** ____/____/____
 Stepmother Stepfather Mo Day Yr
U.S. Citizen: Yes No; provide alien registration #: _____
Address: _____ **Phone#:** (____) _____
Street Address

City State Zip **E-Mail:** _____

My signature affirms that I am the parent of the above student and that all the information on this form is true and correct. 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. I will use all Title IV money received for educational expenses incurred at UW-Whitewater. **WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail or both.

Signature of Parent Borrower - **Required (Please choose a Credit Check Option on reverse side of this form)**

Date

FOR OFFICE USE ONLY

1. Dep Ind **2. Pkg Stat:** No App Applied Complete **3. SAP:** Meets Not Meets **4. Sel. Service:** Y N **5. Lvl:** Fr So Jr Sr
6. Enrollment: F T H LT **7. NSLDS;** Parent ; No FAFSA, Student **8. Credit (DLU only):** Approved Denied
9. Initials: _____ **10. Parent ID#** _____ **11. Amount Approved \$** _____ **12. Online:** _____

**PLEASE COMPLETE
THE REVERSE SIDE**

Parent – Credit Check Options (All applicants please complete)

Parent – please complete this section. In the event your PLUS Loan credit check is **denied**, please choose one of the options below to inform us of which plan of action you wish to pursue:

_____ I will appeal the credit check decision.

_____ I will seek approval of my original PLUS application by finding an endorser (co-signer).

_____ My son/daughter wants to apply for a Federal Direct Unsubsidized Stafford Loan. I will NOT be receiving any PLUS Loan funds. This option is only available if the student applied for financial aid using the Free Application for Federal Student Aid (FAFSA). The student's year in school will determine the maximum additional unsubsidized loan he/she is eligible to receive (Freshman/Sophomore: \$4000; Junior/Senior: \$5000).

_____ None of the above. I will find another source of funding.

Student Eligibility Section

If you DID **NOT** file a Free Application for Federal Student Aid (FAFSA), you must complete this section so the Financial Aid Office can verify your eligibility for the PLUS loan. Your application will be returned to you if anything is left blank. The questions below must be answered by the **student**, not the parent.

1. Were you born before January 1, 1986? Yes No
2. Are you currently a graduate or professional student? Yes No
3. Are you a veteran of the U.S. armed forces? Yes No
4. As of today, are you married? Yes No
5. Do you have children or other dependents who receive more than half their support from you? Yes No
6. Are you an orphan or ward of the court, or were you a ward of the court until age 18? Yes No
7. Have you ever been convicted of possessing or selling illegal drugs? Yes No
8. U.S. Citizen: Yes No, provide alien registration #: _____

Return this form to:

University of Wisconsin-Whitewater
800 W. Main St.
Financial Aid Office
Whitewater, WI 53190
FAX: (262)472-5655

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 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 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.