California State University
SAN MARCOS
Financial Aid and Scholarships Office  Tel: 760.750.4850  Fax: 760.750.3047  www.csusm.edu/finaid

2013-2014 PARENT PLUS LOAN REQUEST FORM

1. STUDENT INFORMATION

First Name  Last Name  Campus ID  Campus Email

2. PARENT INFORMATION

Parent Borrower First Name  Middle Initial  Last Name

Parent Date of Birth (mm/dd/yyyy)  Parent Social Security Number

Street Address

City  State  Zip Code  Area Code  Phone

Parent EMAIL Address  (Please print clearly. Our office will use this email address to communicate with you.)

Relationship to Student  (Mother? Father?)  Parent’s Driver’s License Number  State

3. PARENT CITIZENSHIP

PARENT CITIZENSHIP STATUS (check one)

☐ US Citizen  ☐ Eligible Non-Citizen  ☐ Neither US Citizen, nor Eligible Non-Citizen

Note: If eligible non-citizen, enter Alien Registration #A__________________________
and attach legible photocopy of Alien Registration to this form.

4. PARENT LOAN HISTORY

PARENT LOAN HISTORY (answer all three questions below, Yes or No)

Are you (Parent) currently in default on a federal education loan?

☐ Yes  ☐ No

Do you owe a refund on a federal student grant?

☐ Yes  ☐ No

Have you requested a PLUS Loan with CSUSM before 2013-2014?

☐ Yes  ☐ No

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5. STUDENT ENROLLMENT

STUDENT ENROLLMENT PERIOD (please check one)

☐ Full Year – Fall 2013 and Spring 2014 (attending both semesters, Fall 2013 and Spring 2014)
☐ Fall 2013 ONLY (completing degree program in December 2013)
☐ Spring 2014 ONLY (attending Spring 2014 only)
☐ Summer 2014 (attending Summer 2014 only)

6. PLUS LOAN AMOUNT

Please refer to the PARENT PLUS Eligibility Worksheet on the PARENT PLUS LOAN FACT SHEET to assist you in determining the amount of PLUS loan you wish to request. The loan amount certified cannot exceed the financial aid budget, less any other financial aid received.

PARENT PLUS LOAN AMOUNT REQUESTED:  $__________________________________________

CSUSM reserves the right to certify less than the requested amount should the requested amount exceed the student’s eligibility. The student’s eligibility is based on CSUSM’s cost of attendance minus all other types of financial aid the student is receiving.

PLUS Loan Denial Options (In the event the PLUS loan is credit-denied. Please check only one.)

☐ Allow the student to receive additional Federal Direct Unsubsidized Loan funds. Additional loan funds are: freshman and sophomores up to $4000 per academic year; juniors and seniors up to $5000 per academic year.

☐ Use an endorser (credit-worthy co-signer). By checking this option, I understand that it is my responsibility to contact the Direct Loan Servicer at 1-800-557-7394 to obtain the necessary paperwork for the endorser.

☐ Cancel the PLUS request. I will pursue other options.

7. SIGNATURES

In order to process the PLUS Loan amount requested above, both the Parent Borrower and Student must sign and date this form.

________________________________________________________  __________
Parent Borrower Signature  Date

________________________________________________________  __________
Student Signature  Date

AUTHORIZATION FOR RELEASE OF EXCESS FEDERAL DIRECT PARENT PLUS LOAN FUNDS

All PLUS loan funds will be applied directly to your student’s University account. If the amount of the PLUS loan exceeds the amount due on the student’s account, the University will prepare a refund check within ten (10) working days of the approval or disbursement of the loan. This check will be made payable to the Parent Borrower, and mailed to the Parent address.

The Parent Borrower must complete and sign the section below authorizing the release of excess PLUS loan funds.

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I understand that California State University San Marcos will apply my PLUS Loan funds to my student’s account. If there are excess funds remaining from my Federal Direct PLUS Loan, a refund check will be made payable to me, the Parent Borrower, and will be mailed to me at the address specified on this Parent PLUS Loan Request within ten (10) working days of disbursement. I acknowledge that I have read and understand the information provided to me on the Parent PLUS Loan Fact Sheet.

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PARENT BORROWER NAME (Please PRINT)  Date (mm/dd/yyyy)

PARENT BORROWER SIGNATURE

ADDRESS FOR CHECK TO BE MAILED

CITY  STATE  ZIP
Consent to Obtain Credit Report

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.

Social Security Number ___________________________ Date of Birth (mm/dd/yyyy) ____________

Last Name ___________________________ First Name ___________________________ Middle Initial ____________

Address __________________________________________________________

City ___________________________________ State _______ Zip ____________

Phone Number ___________________________

Signature of Borrower ___________________________ Today’s Date ___________________________