



Federal Direct Parent Loan Program (PLUS)
2011-12

Student Name: _____ Student ID: _____

Phone: _____ Date of Birth: _____

Parent Name: _____

Phone: _____ Date of Birth: _____

Address _____

Street

City

State

ZIP

State of Legal Residence: _____ Driver's License Number _____ Issuing State: _____

Citizenship Status: US Citizen Permanent Resident Alien # A _____

Loan Information: Amount requesting \$ _____. Your loan will be certified for your maximum eligibility based on federal guidelines up to the amount you request. The amount of the loan is determined by Cost of Attendance – Estimated Financial Aid.

Please indicate which term you are requesting the loan for: Spring only Summer only Fall only Fall, Spring & Summer Fall & Spring

I authorize FKCC to pay the credit balance to the student (check one): If you answer YES any balance will be made payable to the student and mailed to the student's address on record at Florida Keys Community College. If you select NO the remaining balance will be mailed to the parent's address as indicated on this form. YES NO

I understand that I am borrowing a federal loan and it must be repaid. I also understand the financial decision on approval of the PLUS loan is dependent upon a credit check performed by the U.S. Department of Education and their final decision cannot be controlled by FKCC.

If my loan funds are not disbursed within 90 days of the approval of my PLUS loan I grant permission for an additional credit check to be performed: YES NO

Signature of PARENT Borrower

DATE

Submit completed form to:

Florida Keys Community College, Office of Financial Aid
5901 College Road, Key West, FL 33040
305-292-5166 (fax)
Loanapplication@fkcc.edu