## \*Financial Aid Office

2121 Euclid Avenue Cleveland, OH 44115



Student Signature: \_

Campus 411 All – in – 1 Enrollment Services
Phone (216) 687-5411 \* FAX (216) 687-9247
For in-person inquiries, please visit Campus411, MC 116
www.csuohio.edu/enrollmentservices/financialaid/

Date: \_\_\_

## 2014-2015 PLUS Request Form

- To avoid delays in receiving funds from your PLUS loan, please follow these instructions:
- Student must file a current year FAFSA (Free Application for Federal Student Aid).
- Parents are permitted to borrow the cost of attendance minus all other financial aid.
- The amount of your PLUS loan may be adjusted if a change in the student's financial aid occurs.
- The parent/borrower must complete the Parent Plus Loan Master Promissory Note at: <a href="https://studentloans.gov/myDirectLoan/index.action">https://studentloans.gov/myDirectLoan/index.action</a>.

PLUS Loan Request will no	t be processed withou	ıt parent & student	signatures. A valid	FAFSA on file is require	ed.
				u will be subjected to a limexpedite this evaluation or	
Credit Denial: In the event th Center. You may obtain a cre incorrect or has been correc	edit-worthy endorser o	or appeal if you sus	pect the informatio	n causing the adverse c	redit decision is
Check one of the following o	ptions in the case of a	a denial:			
I will appeal the cre	edit decision or pursue a	n endorser (credit-w	orthy co-signer) thro	ugh the Department of Ed	ucation.
loan funds (up to \$		ng on grade level). 🧐	Student, initial here	additional Federal Direct L if you authorize th	
Take no further act	ion.				
LOAN PERIOD (check one):	Fall/Spring 2014-2015	Fall 2014_	Spring 2015 _	Summer 2015	
STUDENT INFORMATION (PI	LEASE PRINT)				
CSU ID#					
Last Name		First Name			M.I
PARENT (BORROWER) INFO	PRMATION (PLEASE P	PRINT)			
Last Name	st Name First Name		ne M.I SSN _		
Permanent Street Address					
City	State	Zip Code	DOB	Telephone # (	)
U.S. Citizenship: Citizen	Eligible Non-Citize	n Alien ID:	#		
TOTAL LOAN AMOUNT REQ	UESTED \$	E-ma	il Address		
Disbursements for PLUS loans charges and minor non-educat Higher One refund preference.	ional charges. Students				
Parent, initial here if y mailed to the address listed ab					t. A check will be
I understand that if I purposely face criminal charges and / or		g information on this	document or any oth	ner documents relating to f	inancial aid, I may
Parent (Borrower) Signature: _				Date:	