



For office use only PLUSAP



Montgomery College  
endless possibilities

Office of Student Financial Aid

2011-2012 Direct PLUS Loan Request Form

TO APPLY FOR A Direct PLUS LOAN, A FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) MUST BE ON FILE.

Please fill out all required questions with full data. If you do not fill out the entire form, your loan cannot be processed. Please make sure that all required parties (parent and dependent student) fill out the correct portions of the form.

Student Section

(To be completed by dependent student – PLEASE PRINT CLEARLY):

1. Student's First Name: \_\_\_\_\_ Student's Last Name: \_\_\_\_\_

2. MC Student ID Number: \_\_\_\_\_

3. Street Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

4. Telephone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

5. Driver's License # \_\_\_\_\_ State: \_\_\_\_\_

6. Date of Birth: \_\_\_\_\_ 7. Anticipated Completion Date: Month \_\_\_\_\_ Year \_\_\_\_\_  
(mm/dd/yyyy)

8. Does the above completion date refer to the completion of a degree or a certificate?  Yes  No

9. Will you be continuing your studies at another college when you leave MC?  Yes  No

10. Have you ever attended a school other than Montgomery College after high school?  Yes  No

If yes, please list the school(s): \_\_\_\_\_

Dependent Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Continue on next page

## Borrower (Parent) Section

1. Parent Borrower First Name: \_\_\_\_\_

Parent Borrower Last Name: \_\_\_\_\_

2. Social Security Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

3. Permanent Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

4. Telephone Number: (H) \_\_\_\_\_ (W) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

5. Are you a U.S. Citizen?  Yes  No if no, are you an eligible non-citizen?  Yes  No

If yes, your alien registration receipt number: A \_\_\_\_\_ **(you will need to provide a photocopy of your card)**

6. Your state of legal residence: \_\_\_\_\_ Since: \_\_\_\_\_

7. For what semesters do you want to borrow this loan?  Fall & Spring  Fall Only  Spring Only  
**Contact your campus Financial Aid Office to determine spring/summer eligibility**

8. Total amount you wish to borrow: \$ \_\_\_\_\_  
**(Please write numerical amount)**

9. Tell us about your Employer: Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Telephone number: \_\_\_\_\_

10. Are you currently in default on a federal education loan, or do you owe a refund on a federal student grant?  
 Yes  No

11. Do you want your loan proceeds delivered to the school via Electronic Funds Transfer (EFT)?  Yes  No

12. Do you authorize Montgomery College to send the credit balance incurred by PLUS loan proceeds (received by EFT or paper check) to the dependent student after all Montgomery College charges have been satisfied through the loan credit?

Yes  No (If no, then the credit balance will be sent to the parent's address listed above.)

*Continue on next page.*

13. **References:** Please provide two references with different U.S. addresses. Both references must be completed fully.

**Reference #1**

**Reference #2**

Name \_\_\_\_\_ Name \_\_\_\_\_

Relationship to you \_\_\_\_\_ Relationship to you \_\_\_\_\_

Street Address \_\_\_\_\_ Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

*I Affirm and Declare the Following:*

I am the natural or adoptive parent, or legal guardian of \_\_\_\_\_

Student's Social Security Number: \_\_\_\_\_

I declare that I will use any funds I receive under the Federal Pell Grant, Federal Supplementary Opportunity Grant, Federal Work-Study, Federal Perkins Loan (formerly National Direct Student Loan), and the Direct Stafford/PLUS loan programs solely for expenses connected with attendance at Montgomery College. I understand that four (4) percent will be deducted from the Direct PLUS loan for the loan origination fee. I affirm, to the best of my knowledge that I do not owe a repayment and/or I am not in default to the aforementioned programs for attendance at any postsecondary educational institution.

Parent (Borrower) Signature

\_\_\_\_\_ Date \_\_\_\_\_