



Financial Aid
PLUS LOAN REQUEST FORM

PO BOX 468 POCAHONTAS, AR 72455 (870) 248-4000 FAX (870) 248-4100

Borrowers will also need to complete the PLUS loan application and PLUS Promissory Note at https://studentaid.gov/plus-app/parent/landing

PARENT SECTION:

NAME: LAST, FIRST, MI

STREET ADDRESS

CITY, STATE, ZIP

COUNTRY

SOCIAL SECURITY #

PHONE NUMBER

DATE OF BIRTH

Driver's License # - State

U.S. Citizen? Y or N

Have you completed a PLUS Master Promissory Note at www.studentaid.gov?

\*\*\* Please check one of the following:

Fall semester only Summer I only

Spring semester only Summer II only

Fall and Spring Both Sum I & II only

Amount Requested /semester \$

If a credit balance exists after your student's total balance is satisfied, to whom should we issue the remaining PLUS loan?

PARENT or STUDENT (please circle one)

Parent Signature

Date Requested

STUDENT SECTION:

NAME: LAST, FIRST, MI

SOCIAL SECURITY #

For Financial Aid Office Use ONLY

D I

Loan Period:

PLUS Amount Approved:

Budget: \$

Grade Level:

-EFC

First-Time Borrower: Y or N

-Pell Grant

Program of Study:

-WIG

Graduation Date:

-WIA

DL ELC:

-Other

DL MPN:

-SDL

-UDL

Net PLUS Eligibility: Available

FAO/Date Entered in POISE/EdExpress: