



Financial Aid Office
 5150 N. Maple Avenue, M/S JA 64
 Fresno, CA 93740-8026
 Phone: (559) 278-2182 Fax: (559) 278-4833

PLUS Loan Request Form

STUDENT ID	STUDENT LAST NAME	STUDENT FIRST NAME	PHONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK			

Fresno State participates in the Federal Family Education Loan Program (FFELP). To request a Parent Loan for Undergraduate Students (PLUS), complete the information below in its entirety.

Return this form, along with your Pre-Approval from your lender, to the Financial Aid Office.

Incomplete forms will be returned, which will delay your processing.

OFFICE USE ONLY

Parent ID

PARENT INFORMATION

First Name	Middle Initial	Last Name
Date of Birth <small>mm/dd/yyyy</small>	Parent SSN	Phone <small>use area code</small>
Drivers License Number	Drivers License State	
U S Citizen Eligible Non Citizen	Alien Registration Number	
Address	if address changes notify financial aid immediately	
City	State	Zip

Please check the following boxes after you have read the statements and sign below:

I understand that this PLUS loan is to be used for educational expenses while my dependent student is attending Fresno State, and I will use the proceeds from this loan accordingly. I also understand that this is a loan that must be repaid with interest.

In addition, I understand that I must sign a PLUS Master Promissory Note (MPN) to get this loan. I may receive additional loans in the future using this MPN, and that all debts acquired under this MPN are fully enforceable in the court of law.

I authorize the Financial Aid Office to electronically send the necessary data to my lender/guarantee agency to process my PLUS loan.

I authorize funds to be sent to Fresno State via Electronic Funds Transfer. I also authorize those funds to be applied to my dependent student's Fresno State account to pay any and all charges on said account. Any funds remaining after charges are paid will be mailed to me.

I Request a Parent Plus loan of

\$\$ amount

from

[lender name](#)

Parent Signature _____

Date

M/DD/YYYY

Before submitting to the Financial Aid Office, please make a copy for your records.