

2019-2020 Federal Direct Parent PLUS Loan Authorization Form

This form should be **completed by the parent** of a dependent undergraduate student. The student **must** already be awarded a Parent PLUS loan. Please submit this form to begin the application process.

Parent Information (Borrower)

Parent Name _____ SS# _____
Last First MI

Permanent Address _____ Date of Birth _____
Number & Street City State Zip Month / Day / Birth Year

Home Telephone (_____) _____ Work Telephone (_____) _____

Email Address (Required) _____ Driver's License (Required) _____
State Number

Citizenship Status (Please Check One Box Only):

- U.S. Citizen/National
- Permanent Resident/Other Eligible Non-Citizen
Alien Registration No. _____

Student Information

Student Name _____ Student ID# _____
Last First MI

Loan Information

I consent to the Federal Direct PLUS Loan amount awarded by the Financial Aid Office:

- YES
- NO

If you answer "NO", please indicate your requested amount. Parents may borrow any amount up to the cost of education minus any other financial aid the student may receive.

\$ _____

Loan Period (check one): _____ Fall/Spring _____ Fall Only _____ Spring Only _____ Summer

Borrower (Parent) Consent to Obtain Credit Report

I consent to the U.S. Department of Education and its agents obtaining a report of my credit record and using the information from that report in determining my eligibility for a Federal Direct PLUS Loan:

- YES
- NO

I understand that if it is determined that I have an adverse credit history, that my son/daughter may be awarded an Additional Unsubsidized Stafford Loan:

- YES
- NO

Borrower (Parent) Master Promissory Note

I understand that if my credit is approved, I will need to electronically sign my Master Promissory Note (eMPN) and funds will not be disbursed until the eMPN is completed at www.studentloans.gov :

YES NO

Disbursement Information

Federal law requires excess PLUS loan proceeds to be refunded to the parent unless otherwise directed; therefore, any excess PLUS loan proceeds will be mailed to you after the student's UTRGV account is paid:

YES, please mail excess PLUS loan proceeds directly to me

NO, please mail excess PLUS loan proceeds to my son/daughter

Parent & Student Certification

By signing below We, the Parent and Student, certify that:

- The Borrower listed on this form is the natural parent or legal adoptive parent of the student named on this form.
- We authorize the Financial Aid Office to accept this Parent PLUS loan on our behalf.
- All the information on this form is true and correct to the best of our knowledge and that if asked by an authorized official, I agree to give proof of the information on this form.
- We are not in default on a federal student or parent loan or owe a repayment on a federal grant.
- We do not have property(s) subject to a judgement lien for a debt owed to the United States.
- We will use any federal student aid received only to pay for expenses related to attending UTRGV.

Parent Signature: _____

Date: _____

Student Signature: _____

Date: _____

Please submit completed form to either of the following UTRGV locations:

<p>The Tower, Main 1.100 One West University Blvd. Brownsville, Texas 78520 Ph: (888) 882-4026 Fax: (956) 882-8229</p>	<p>Visitors Center 1.113 1201 West University Drive Edinburg, Texas 78539 Ph: (888) 882-4026 Fax: (956) 665-2392</p>
---	---

Privacy Act Disclosure Notice

The Privacy Act of 1974 (5 U.S.C.552a) requires that the following notice be provided to you. The authority for collecting the information requested on this form is § et seq. of the Higher Education Act of 1965, as amended. Your disclosure of this information is voluntary. However if you do not provide this information, you cannot be considered for a Direct PLUS Loan. The information in your file may be disclosed to third parties as authorized under routine uses in the Privacy Act notices called "Title IV Program Files" (originally published on April 12, 1994, Federal Register, Vol. 59 p. 17351) and "National Student Loan Data System" (Originally published on December 20, 1994, Federal Register, Vol. 59 p. 65532). Thus, this information may be disclosed to federal and state agencies, private parties such as relatives, present and former employers and creditors, and contractors of the Department of Education for purposes of administration of the student financial assistance program, for enforcement purposes, for litigation where such disclosure is compatible with the purposes for which the records were collected, for use by federal, state, local, or foreign agencies in connection with employment matters or the issuance of a license, grant, or other benefit, for use in any employee grievance or discipline proceeding in which the Federal Government is a party, for use in connection with audits or other investigations, for research purposes, for purposes of determining whether particular records are required to be disclosed under the Freedom of Information Act, and to a Member of Congress in response to an inquiry from the congressional office made at your written request.

Because we request your social security number (SSN), we must inform you that we collect your SSN on a voluntary basis, but section 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4) provides that, in order to receive any grant, loan, or work assistance under Title IV of the HEA, a student must provide his or her SSN. Your SSN is used to verify your identity, and as an account number (identifier) throughout the life of your loan(s) so that data may be recorded accurately.