

**2009-2010**  
**REQUEST FOR A WILLIAM D. FORD FEDERAL DIRECT PLUS LOAN**

**Borrower Eligibility:**

You must be a parent of a dependent student and willing to borrow loan funds on their behalf.

Independent students and their parents are not eligible to borrow under the Federal Direct PLUS Loan program. Please contact the Financial Aid Office to request a Federal Direct Unsubsidized Stafford Loan.

**How much you are eligible to borrow:**

The annual loan limit is the cost of attendance minus any financial aid received.

**Interest rate and fees:**

For 2009-2010, the interest rate is fixed at 7.9%, with an upfront net guarantee fee of 2.5%.

**How your loan application is processed:**

There are 2 pages that must be completed, the PLUS Application and the Consent to Obtain Credit Application form. Completely fill out these 2 pages and submit them to the Financial Aid Office at Fitchburg State College. Once we receive these, we will perform a credit check and notify you of the results via a revised award letter.

**If you are approved** please accept, sign and return the revised award letter to our office. We will then send you instructions for completing your Electronic Master Promissory Note (eMPN) online. If you completed a PLUS MPN with us during a previous award year, you are not required to complete another one. Once a valid eMPN is on file with us, you may use the loan funds as a credit towards your student's bill.

**If you are denied** the revised award letter will include an additional unsubsidized student loan, which would be borrowed in the student's name. Please have the student sign, accept and return the revised award letter to our office if s/he wishes to borrow. You may also complete the Endorser Form and be reconsidered for the PLUS Loan. The Endorser Form will be sent directly to you from the Direct Loan Servicing Center.

**Additional information available through:**

*Direct Loans – PLUS Loan Basics* brochure, available in the Financial Aid Office

FSC's Financial Aid Office (978)665-3156, <http://www.fsc.edu/finaid/>

Direct Loan Servicing Center at (800)848-0979,  
<http://studentaid.ed.gov/PORTALSWebApp/students/english/parentloans.jsp>

2009-2010

**APPLICATION FOR A WILLIAM D. FORD FEDERAL DIRECT PLUS LOAN**

If you are a parent of a dependent student and wish to borrow loan funds on their behalf please complete the following information and return it to the Financial Aid Office at Fitchburg State College. **All questions must be completed in order for your loan to be processed.** If any section does not apply please put N/A on that line.

**SECTION A (To be completed by the student)**

Name: \_\_\_\_\_  
Last First Middle Initial

Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

I am currently in default on a federal education loan, or owe a refund on a federal student grant. \_\_\_YES \_\_\_NO

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SECTION B (To be completed by parent applicant)**

Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Initial

Email Address: \_\_\_\_\_

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

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone Number:(\_\_\_\_)\_\_\_\_-\_\_\_\_

U.S. Citizenship Status: \_\_\_US Citizen or national  
\_\_\_Permanent resident or eligible non-citizen  
Alien Registration Number: \_\_\_\_\_  
\_\_\_Neither

Driver's License Number: \_\_\_\_\_ Driver's License State: \_\_\_\_\_

I am currently in default on a federal educational loan or owe a refund on a federal student grant. \_\_\_YES \_\_\_NO

**Loan amount requested:** \$ \_\_\_\_\_

\*Please remember that a net guarantee fee amount of 2.5% will be deducted from the proceeds.

Loan period: \_\_\_Full year \_\_\_Fall only \_\_\_Spring only

\*We recommend you apply for the full year amount instead of having separate loans for each semester.

**Borrowing Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*Your signature is authorization to perform the necessary credit check for the PLUS Loan application process.  
Please return to the Financial Aid Office at Fitchburg State College, 160 Pearl St, Fitchburg, MA 01420 or  
FAX(978)665-3559

## 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 whether to make a Direct PLUS Loan to me. I understand that I will be notified in writing of the results of the credit check with respect to my loan application.

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth (MM/DD/YYYY)

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
M.I.

\_\_\_\_\_  
Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Signature of Borrower

\_\_\_\_\_  
Today's Date

### 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 §451 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 on this form will be used to determine your eligibility 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.