2019–20 Parent PLUS Loan Application

Instructions

☐ **Return** this form to Financial Aid at the address below, email it to financialaid@clarkssummitu.edu, or fax it to 570-585-9226.
☐ **Complete** your Master Promissory Note (MPN) online at studentloans.gov (parent who is applying).

Student Name _____   Last 4 digits of SSN _____

Parent Name _____   SSN _____

Street Address _____

City/State/Zip _____

Home Phone _____   Mobile Phone _____

Date of Birth _____   Email _____

Driver's License _____

US Citizen: ☐ yes   ☐ no

Amount requested $ _____

■ Origination Fee: 4.248%.
■ Interest: 7.08% fixed rate.
■ Student must be enrolled at least half time.

Loan requested for: (*check one box only*)

☐ Fall 2019 and Spring 2020 (*amount is divided equally*)
☐ Fall 2019
☐ Spring 2020
☐ Summer 2020

Statement of Understanding

I authorize Clarks Summit University to forward my request for the PLUS loan to the Department of Education for approval. I understand that the Department of Education will conduct a credit check and that I must sign my Master Promissory Note at studentloans.gov for my loan to be processed.

Parent Signature _____   Date _____

Office use only

Date Received	MPN Status	Contact Date	Date disbursed
SAP Status	Approval Status	Date added to CV	Initials

CLARKS SUMMIT UNIVERSITY