



Claremont McKenna College

Federal PLUS Loan Request Form

You **MUST** complete this form to activate your Federal PLUS Loan Request. This is **NOT** a promissory note.

You must submit this form directly to the Financial Aid Office before your PLUS loan can be processed. If this is your first time borrowing a PLUS loan at CMC, you must submit a Federal PLUS Master Promissory Note. Go to our website at <http://www.claremontmckenna.edu/finanaid/ParentLoans.php> to begin this process OR you may choose any participating FFELP lender by accessing their website directly. To speed up your process we recommend electronically signing your Master Promissory Note. If you have a Master Promissory Note (MPN) on file, the Financial Aid Office will reference the lender indicated to process this PLUS Loan Request.

Student Name/Grad Date: _____ Student SSN: _____

Parent Borrower Name: _____ Parent SSN: _____

(Must be completed by parent signing the Master Promissory Note)

Parent DOB (MM/DD/YY): _____ Parent Phone: _____ Parent Driver's License #: _____

Parent Address: _____ Parent State of Legal Residence: _____

Parent Email: _____

Total Federal PLUS Loan amount requested

(Not to exceed student's total cost of attendance minus other financial aid): \$ _____ .00

Lender Name: _____ Lender Code: _____

(Must match the Lender Name and Code on your Master Promissory Note)

Will Student Study Abroad during the 2008-2009 Academic Year? No **Yes:** Fall Spring All Year

Parent Borrower's Signature: _____ Date: _____

Parent Property Lien Statement

The Federal Government requires recipients of Title IV Federal Financial Aid funds to certify that they do not own any property that is currently subject to a judgment lien for a debt owed to the United States government. This document satisfies the requirement and will help us determine if you are eligible for a Federal PLUS loan. **Please check the box that applies to you as the parent borrower:**

- I certify that **I do not** own any property which is subject to a judgment lien for a debt owed to the US government, including but not limited to the Internal Revenue Service (IRS.)
- I certify that **I do** own property which is subject to a judgment lien for a debt owed to the US government. I understand that I am ineligible to receive a Parent Loan for Undergraduate Students (PLUS) unless I pay this debt in full or make arrangements satisfactory to the US government to pay this debt. I also understand that even if I have made these arrangements, a lien appearing on my credit report may be deemed as adverse credit according to my lender, and result in a denial of my PLUS Loan. I understand that this certification is retroactive to PLUS funds I may have received prior to disclosing this information to Claremont McKenna College.

**** YOU MUST COMPLETE THE BACK OF THIS FORM ****

Authorization for Federal Parent Loan for Undergraduate Students (PLUS) Payment of Allowable Charges

Parent/Borrower Name: _____ **SSN:** _____

I authorize Claremont McKenna College to apply my Federal Parent Loan for Undergraduate Students (PLUS) loan funds which I am eligible to receive to pay for authorized allowable charges on my student's account. Authorized allowable charges are charges other than tuition, fees, and contracted room and board. I am aware that any of the following charges must be approved by the Student Accounts Office before they can be billed to my student's account.

If the total of my PLUS loan proceeds exceed the allowable institutional charges (i.e. tuition, fees, room, board, and other institutional charges), I authorize the Student Accounts Office to retain these funds on my student's account as a credit balance. I also authorize the Student Accounts Office to apply any PLUS loan credit balance to prior year charges, if applicable. I understand that *I must request in writing* to have any credit balance refunded to me (or my student) from the Student Accounts Office is I wish to have that credit balance refunded prior to the end of the academic year. Any federal credit balance will be automatically refunded at the end of each academic year. I understand that I may cancel this authorization at any time, but that cancellation is not retroactive.

I understand that I may refuse to authorize this statement and that this statement is effective for my student's entire period of enrollment at Claremont McKenna College.

Examples of Allowable Charges:

- | | |
|--|---|
| <input type="checkbox"/> Baxter | <input type="checkbox"/> Lost Key (room, locker, mailroom) |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Non-contracted food costs (Hub Debit Card) |
| <input type="checkbox"/> Books and Supplies | <input type="checkbox"/> Parking permit fees/violations |
| <input type="checkbox"/> Breakage in Chemistry Lab | <input type="checkbox"/> Payment Plan service charge |
| <input type="checkbox"/> Course Fees (Science, Music, Art, etc.) | <input type="checkbox"/> Short Term loans (must be approved by the FAO) |
| <input type="checkbox"/> Dorm Damage Fines | <input type="checkbox"/> Study Abroad Charges (e.g. transportation) |
| <input type="checkbox"/> Early Arrival Fees | <input type="checkbox"/> Unreturned athletic equipment charges |
| <input type="checkbox"/> Enrollment Fees (security deposit) | <input type="checkbox"/> Yearbook |
| <input type="checkbox"/> Health Insurance fee paid to outside agency | <input type="checkbox"/> Other approved charges |
| <input type="checkbox"/> International Student ID card | |

Parent/Borrower's Signature: _____ **Date:** _____

Print **Parent Borrower** name: _____

If you have any questions, please contact the Financial Aid Office at (909) 621.8356.

Return To:

Claremont McKenna College, 890 Columbia Ave, Claremont, CA 91711

(909) 621.8356 • (909) 607.0661 FAX

FinAid@ClaremontMcKenna.edu

2008-2009 PLUS Loan Eligibility Determination

SCHOOL USE ONLY

Grade Level: Fr So Jr Sr

COA: \$ _____

Est. FA (need based only): \$ _____

PLUS Eligibility \$ _____

Certified Loan Amounts:

PLUS \$ _____

PLUS2 \$ _____

Complete:

Signed Award Letter

Confirm Selective Service

Completed St of All Chgs

Verification, if required

Parent All Chgs & Lien Forms

Certified by: _____

Date: _____