

**CHICAGO STATE UNIVERSITY
FEDERAL PARENT PLUS LOAN REQUEST FORM**

SPRING 2009 SEMESTER

Student Name _____ Student SS# _____ Date of Birth _____

Student Certification: I will enroll for _____ hours for the Spring semester. I agree to notify the Office of Student Financial Aid, **in writing**, if I reduce the number of hours that I have indicated I will enroll for. (Please Note: If you do not enter "hours" for the Spring Semester the PLUS Loan will be processed based upon half-time enrollment.)

Student Signature _____ Date _____

ALL ITEMS BELOW RELATE TO PARENT INFORMATION, NOT STUDENT INFORMATION.
This signed and dated form must be submitted to the Office of Student Financial Aid. All items must be completed. Please allow 3 - 4 weeks for processing.

Allow 4 - 6 weeks if submitted between December 15, 2008 and January 31, 2009.

A faxed copy will be accepted at 773-995-3574. A scanned/imagined copy will be accepted by e-mail at csu-finaid@csu.edu

Parent Name _____ SS# _____

Address _____ City/State/Zip _____

Driver's License # _____ State of Issuance _____
(no State ID's please - if you don't have a driver's license enter "None")

Telephone Number _____ Date of Birth _____
(area code)

State of Legal Residence _____ E-mail address _____
(not required, but helpful should we need to contact you)

Citizenship Status (check one):

____ U.S. Citizen/National

____ Permanent Resident / Other Eligible Non-Citizen (Alien Registration No. _____)

Are you currently in default on a Federal PLUS and/or student loan? ____ Yes ____ No

Requested Federal Parent PLUS Loan amount: \$ _____ or Maximum Eligibility

To which lender should we submit this loan request? _____

(If you do not indicate a lender one will be chosen for you.)

Visit our "Choosing a Lender" web page for more information)

Lender Code: _____

Guarantee Agency preference: _____ **(Fill this in only if you would like to use a guarantee agency other than the guarantee agency of choice for your chosen Preferred Lender or if you have chosen a lender other than one of the Preferred Lenders. If you have chosen a lender other than one of the Preferred Lenders, and do not indicate a guarantee agency preference, one will be chosen for you.)**

By completing this application, you authorize us to receive your loan proceeds electronically and acknowledge that you have read, understand and agree to comply with the terms as set forth in the "SPRING 2009 PARENT PLUS LOAN FACT SHEET" which you may review and download from the Financial Aid section of the Chicago State University web site

Your dependent child may review the status of this application at any time by accessing his/her student financial aid information on CSU X-press (a secure web site to which every student has access).

INFORMATION/STATUS WILL NOT BE GIVEN BY TELEPHONE.

Parent Signature **VOID VOID VOID VOID** Date _____

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Grade _____ FT HT (# Hours _____) Grad. Date _____ SAP Reviewed? Yes No

Approved: \$ _____ Budget _____ Aid _____ FAA _____ Date _____