



A. Student Information	
Student's Name: _____	FRC ID: _____

B. Parent Information	
Parent Name: _____	SSN: _____
DOB: _____	

C. Additional Loan – Please check the semester(s) you would like to request additional PLUS loan funds:		
<input type="checkbox"/> Fall 2020 & Spring 2021	<input type="checkbox"/> Fall 2020 Only	<input type="checkbox"/> Spring 2021 Only
Original PLUS Amount: \$ _____		
<i>Additional PLUS Amount: \$ _____</i>		
New PLUS Loan Amount: \$ _____		
<i>Current interest rate is 5.30%</i>		

New loan amount equals original PLUS amount plus additional PLUS amount.

D. Borrower Right to Cancel
You have the right to cancel all or a portion of your PLUS loan within 14 days of the date FRC disbursed your loan. If you would like to cancel your loan, the funds will be reversed from your students account and returned to the Federal Direct Loan program. Note: If a refund has already been generated, you <u>must</u> return the refund check with this form otherwise, the loan <u>cannot</u> be reduced or cancelled.

E. Notices
I understand the following:
<ul style="list-style-type: none"> • My child must be enrolled in at least 6 units in order for the parent to receive PLUS loan • The parent PLUS loan is disbursed into my student's billing account first and FRC will use these funds to pay enrollment, housing charges, transit fees, health fees, individual course fees, course material fees, book loans for the current year and, up to \$200 of applicable prior academic year charges. • All loans are disbursed in <u>two</u> equal disbursements, <u>including</u> single semester loans. • Loans <u>will not</u> be processed if loan type and dollar amounts are incomplete • *A credit check will only be performed if the <u>initial credit check has expired</u>. Parent PLUS loan credit checks generally expire 180 days from the date the parent PLUS loan application was completed.
I understand all the requirements listed above: _____ (initial here)

F. Parent Certification and Signature – I understand that this a federal educational loan that I <u>must</u> repay and, by signing this application, I am authorizing my parent PLUS loan be increased as specified above. I further certify that all the information reported on this application is complete and correct. The parent who requested the original PLUS loan must sign and date below. Warning! If you purposely give false or misleading information you may be fined, sentenced to jail, or both.

This worksheet must be signed and dated to be valid. Electronic and/or digital signatures are not valid.

Parent Signature: _____	Date _____
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For Office Use Only	
PLUS Amount <i>Originated</i> : _____	
Comment(s): _____	
Processed/Reviewed By: _____	Date: _____