

**INDIAN HILLS COMMUNITY COLLEGE
2020-2021 FEDERAL PARENT PLUS LOAN APPLICATION**

Federal **PLUS** (Parent Loan for Undergraduate Students) Loans enable parents with good credit histories to borrow loans to cover the educational expenses of each child who is a dependent undergraduate student enrolled at least half-time.

The yearly limit on a **PLUS** Loan is equal to your cost of attendance minus any other financial aid you receive. For example, if your cost of education is \$10,000 and you receive \$7,000 in other financial aid, your parents could borrow up to \$3,000.

Student's Name _____ Student's ID Number _____

ANY items left blank/not answered will result in a delay in processing. Please complete back page.

PARENT INFORMATION

Name			
	Last	First	M.I.
Permanent Address			
	Street	City	State
Social Security Number		Phone Number	
Date of Birth		I am a U.S. citizen:	Yes No
	(MM/DD/YYYY)		
Email Address:			

A credit check approval from the Direct Loan Service Center is required for a Parent PLUS Loan. Please complete the 'Consent to Obtain Credit Report' on the back of this application.

Certifications

I certify that I do not owe a refund on any grant or loan, am not in default on any loan or have made satisfactory arrangements to repay any defaulted loan, and have not borrowed in excess of the loan limits under Title IV programs at any institution. I also certify that I am the legal parent or stepparent of the above named student.

I authorize Indian Hills Community College to apply my Parent PLUS Loan proceeds to all Indian Hills Community College unpaid charges each term. This may include, but may not be limited to, authorized charges for tuition, fees, books, room, and board.

Loan Amount Requested \$ _____ **What term(s) will the student be enrolled?** ___ FA ___ WI ___ SP ___ SU

Do you want any refund resulting from your PLUS Loan to be issued to your student? ___ *Yes ___ No

***If "Yes," please complete authorization on back page.**

The student must also have a valid 2020-2021 FAFSA on file at Indian Hills Community College in order for a PLUS Loan to be processed. Please complete a PARENT PLUS Loan Master Promissory Note at www.studentloans.gov using your (the parent's) FSA ID.

In the event my loan is denied due to adverse credit, ___ I WILL ___ WILL NOT pursue a co-signer.

Date _____

Signature of Parent Loan Borrower _____

OFFICE USE ONLY

Date Calculated _____ **By** _____ **Parent ID** _____ **NSLDS Default** Yes No

Please return this completed form to Indian Hills Community College along with any other requested materials:
Fax: 641.683.5741 | Mail: IHCC Financial Aid Office, 525 Grandview Ave, Ottumwa, IA 52501
or bring to One Stop/Bennett Student Services Building

Student's ID Number: _____

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

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 used 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.

PLUS Refund Authorization

Normally, if all charges on the student's account are paid in full, the refund check from any PLUS proceeds will be mailed to the parent borrower. If you indicated on the front page of this application that you would like any refund from this PLUS Loan to be issued to your student, please complete the information in the box below.

In order for the student to receive this refund, we will need the following information completed by the parent requesting the loan:

Please print:

Your name: _____

Your student's name: _____

Student's ID or Date of Birth: _____

The application of Parent PLUS Loan funds that result in a refund are typically sent to the parent borrower. This consent hereby authorizes Indian Hills Community College to refund to the above named student, any monies resulting from the application of Parent PLUS Loan proceeds for the 2020-2021 academic year.

Signature of Parent Borrower

Date