

Federal Direct PLUS Loan Pre-Application

Please Note:

The certified gross loan amount will be no higher than the cost of education less any financial aid received.

The PLUS Loan will be divided into two equal disbursements for a full year award.

Fall Bill Due Date: July 31, 2008

Spring Bill Due Date: December 31, 2008

All pertinent loan processing information can be found at
www.mtholyoke.edu/go/plus

Please return at least two weeks prior to the semester due date.

Student Financial Services
50 College Street
South Hadley, MA 01075
(413) 538-2291 phone
(413) 538-2512 fax
sfs@mtholyoke.edu

STUDENT INFORMATION

Name _____

MHC ID # _____

Date of Birth _____

PARENT INFORMATION (To be completed by ONE parent borrower only)

Do not leave any information blank.

Parent Full Legal Name _____

Social Security # _____

Driver's License # _____

Home Address _____

Email* _____

Telephone _____

* PLUS Loan credit decisions will be emailed to the parent borrower

Citizenship Status:

U.S. Citizen or National

Permanent Resident

Other eligible non-citizen Alien registration number: A _____

Loan Period:

Full Year 2008-2009 Repayment begins March 2009

Fall only 2008 Repayment begins October 2008

Spring only 2009 Repayment begins March 2009

Loan Amount Requested \$ _____

(A 4.0% origination fee will be deducted from the above amount)

I wish to add the 4% origination fee to the loan amount requested above.

Do not add the 4% origination fee. I understand the actual disbursed amount will be less.

CERTIFICATION

I request that Mount Holyoke College submit this information to the U.S. Department of Education.

Parent Signature _____

Date _____

INTERNAL USE ONLY

Approved

Initials: _____

Date: _____

Denied

Email Notification Sent

Initials: _____

Date: _____