

## **IMPORTANT DETAILS ON COMPLETING THIS DOCUMENT**

1. We strongly advise that you type your answers into the fillable fields for clarity.
2. If parent signature is required, parent must hand-sign the document. Digital signatures for parents are not allowed.
3. Do not use a mobile phone to complete this document. Doing so may result in lost data and inaccurate formatting.
4. You must save this document to your computer, or print it immediately, to prevent loss of the data you entered.
5. **Students within our service area must submit documents to the Financial Aid Office in person.** Distance students may submit documents via student email or postal service. The Financial Aid Office is no longer able to accept documentation via fax.
6. The fillable fields on this document may not work when opened in the Mozilla Firefox browser. We advise that you complete the form in Internet Explorer or Chrome instead.



Complete this form only if you wish to apply for a DIRECT PLUS LOAN during the 2016-2017 school year.

This form must be complete and is required by the A-B Tech Financial Aid Office for processing the PLUS Loan.

Parent's Name: \_\_\_\_\_

SSN: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Student's Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Do you authorize A-B Tech to pay the credit balance to the student? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you completed the PLUS Master Promissory Note and Requested a Direct PLUS Loan? \_\_\_\_\_ Yes \_\_\_\_\_ No

Loan amount requested for FALL: \$ \_\_\_\_\_ .00 SPRING: \$ \_\_\_\_\_ .00

I request a total amount in PLUS loans of: \$ \_\_\_\_\_ .00

***By signing and dating below, I understand that this is a loan and it must be repaid. I also request that A-B Tech begin processing a Direct PLUS loan in my name for the above referenced amount. Electronic signatures cannot be used on this form.***

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**YOU MUST SAVE THIS DOCUMENT TO YOUR COMPUTER OR PRINT IT IMMEDIATELY TO PREVENT LOSS OF THE DATA YOU ENTERED.**

**Parent's Information (Borrower)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

SSN: \_\_\_\_\_

**Student's Information**

Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

**Academic Year 2016-2017**

PLUS Loan funds in excess of student's charges should be:

\_\_\_\_ Refunded to Student

\_\_\_\_ Refunded to Borrower (Parent) at above address

**Electronic signatures cannot be used on this form.**

\_\_\_\_\_  
Borrower's Signature

\_\_\_\_\_  
Date