

6400 PRESS DRIVE Bashful Administration Building, Room 164 NEW ORLEANS, LOUISIANA 70126 Telephone: (504) 286-5263 FAX: (504) 286-5213

Parent PLUS Loan IN-TAKE Form

Student Name: _____

SUNO ID Number: _____

This form is only to be complete *before* a parent has been credit approved or denied for the Federal Direct PLUS Loan. To apply for the Parent PLUS loan, a parent must complete and submit an application at <u>www.studentloans.gov</u> to receive a decision.

PARENT INFORMATION

(This section to be completed and signed by the Parent Borrower)

Parent Last Name: Pare		Parent First Name:	ent First Name:	
Parent Borrower Social Security N	lumber:			
Requested Parent PLUS Loan Amo	ount: \$			
School Year:	Term (ple	ease circle) : FALL SPRING	SUMMER	
Driver's License Number:		Citizenship Status:		
ADDRESS:				
СІТҮ				
Contact Number:				
E-mail Address:				
	PARENTAL CE	RTIFICATION		
or daughter enrolled at Souther Satisfactory Academic Progres	rn University at New Orl ss in order to be eligible	r a Federal Direct Parent PLUS Lo eans. I understand that my child for this Parent PLUS Loan. I furt application at <u>www.studentloan</u>	d must be maintaining her agree that I must	
Parent Borrower Name (PLEAS	SE PRINT)	Parent Borrower Soc	Parent Borrower Social Security Number	

Parent Borrower Signature

Date

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