

FAULKNER UNIVERSITY PARENT LOAN INFORMATION SHEET

Parent Name _____ **SS#** _____

Date of Birth _____

Street Address _____ City _____ State _____ Zip _____

Home telephone number _____ Work telephone number _____

Student Name _____ **SS#** _____

Date of Birth _____

Campus Attending Main ___ Bir ___ Hunt ___ Mob ___ MEP ___ Other _____

I am applying for a total of \$ _____ in parent loan funds from the Federal PLUS Loan Program. **(This amount MUST be filled in.)** These funds are needed to cover my student's educational expenses for the following term(s):

Summer 2009 _____ Fall 2009 _____ Spring 2010 _____ Summer 2010 _____

I understand that I have the right to cancel all or any of my loans and to have the loan proceeds returned to the bank. I can do this by notifying the Financial Aid Office by mail, e-mail, or telephone no later than 14 days after the school receives my Federal Plus Loan proceeds.

Parent Signature _____ Date _____

NO LOAN(S) WILL BE PROCESSED WITHOUT THIS FORM
FINANCIAL AID OFFICE USE ONLY

Grade Level _____ Enrollment Status _____ Completion Date _____

Loan Period _____ Lender _____ New or Serial _____

COA _____ - Aid _____ = Total Loan Amount Certified _____

Disbursement Dates and Amounts

1. _____ Amount _____

2. _____ Amount _____

3. _____ Amount _____

4. _____ Amount _____