



COMMUNITY COLLEGE OF ALLEGHENY COUNTY

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2020-21 Parent PLUS Loan Request

Parent's Name: _____ SS#: _____

Parent's Date of Birth: _____

Current Address: _____

Home Phone: _____ Mobile Phone: _____ Email: _____

Student's Name: _____ SS# or ID#: _____

Loan period requested: (check one only)

NOTE: Each loan period requires a separate loan request form.

[] Fall 2020 Loan Amount Requested: \$ _____

[] Spring 2021 Loan Amount Requested: \$ _____

[] Summer 2021 Loan Amount Requested: \$ _____

To complete the loan process, a parent borrower is required to use the Department of Education-issued FSA ID https://fsaid.ed.gov/npas/index.htm (not the child's) at www.studentloans.gov and click on "Apply for PLUS loan". Lastly, complete loan agreement and click on PLUS MPN for Parents

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Revised: January 23, 2020

