



Student Financial Services Office • 197 Franklin St. Auburn, NY 13021
Phone 315-294-8470 • Fax 315-252-2185 financialservices@cayuga-cc.edu

REQUEST FOR FEDERAL DIRECT PLUS LOAN

The Federal Direct Parent Loan for Undergraduate Students (PLUS) is a non-need based federal loan program. The lender is the U.S. Department of Education rather than a bank or credit union. If you are interested in borrowing a Federal Direct PLUS Loan, please complete this form and return it to the Student Financial Services Office.

By completing this form, I authorize Cayuga Community College to perform a credit check.

TO BE COMPLETED BY THE PARENT BORROWER:

Parent Name _____ Last 4-digits of SS# _____

Address _____
Street City State Zip Code

Phone No. _____ Date of Birth _____

Parent email address _____

Check one: _____ U.S. Citizen _____ Eligible Non-Citizen Alien Registration Number _____

Driver's License: State _____ # _____

Relationship to Student (check one): _____ Father _____ Mother _____ Stepparent

Total Amount you wish to Borrow \$ _____

Are you in default on a student loan? (check one) _____ Yes _____ No

Loan Period - Please Check One: If you will be borrowing for both the Fall and Spring semesters, we recommend that you apply for Fall and Spring loans at the same time. PLUS Loans for one semester only will require multiple disbursements, and half of the funds will not be available until after the midpoint of the semester.

☐ **Fall 2026 (1/2) and Spring 2027 (1/2)**

☐ **Spring 2027 Only**

Parent Master Promissory Note (MPN):

_____ I have signed a MPN online at studentaid.gov _____ / _____ / _____ (Date signed)

_____ I have a Federal Direct Loan MPN on file from a prior year.

I, the parent borrower, authorize the Student Financial Services Office at Cayuga Community College to apply all PLUS funds to any charges on the student's account including tuition, fees, bookstore charges and any other charges that the student may authorize or cause to be assessed against the student account. I confirm that I am not in default on a federal student loan. All funds in excess of the student bill will be refunded.

☐ I do **or** ☐ I do not give permission to have excess PLUS proceeds released to the student.

Parent Signature _____ Date _____

TO BE COMPLETED BY STUDENT:

STUDENT NAME _____

C # _____ DATE OF BIRTH _____

OFFICE USE ONLY

Approved Amount \$ _____ Date Loan Originated _____ Loan Period _____ SFS Initials _____