

Office of Student Financial Assistance Lucas Administration Center 416 Nunn Drive Highland Heights, KY 41099 Office: 859-572-5143 Fax: 859-572-6997 ofa@nku.edu

PLUS LOAN AUTHORIZATION FORM 2019 - 2020

	STUDENT INFORM	ATION		
Student's Name	Please Print	Please Print Middle Initial		
Telephone Number			Student ID Number	
		· · · · · · · · · · · · · · · · · · ·		
	PARENT BORROWER IN	FORMATION		
Parent's Name	Please Print	ease Print Middle Initial		
Street Address	City	State	Zip Code	
Street Address	City	State	Zip Code	
Toley have Niverhau		t. No	Disth Data	
Telephone Number	Social Securi	Social Security Number Birth Date		
check annually* at www.studentloans.gov (see "Reschool at the appropriate time. *Credit check information is only valid for 18	80 days.		unas will be alsbursed to the	
	LOAN PERIO	D		
Check one:				
Academic Year*	all ONLY	Spring ONLY	Summer	
*Loan amounts for an academic year loan will b	be divided evenly between the fall and	spring semesters.		
	\$ Requ	ested amount		
Loan recipients who drop below ha	· I		ent loan disbursements.	
	CERTIFICATIO)N		
			- #inint to man to mine more f	
I certify that all the information on this form of the information provided. I certify the part I authorize Northern Kentucky University t enrollment status, current address). I authorize	arent listed on this form is the biol o release to the Department of Ed	ogical/adoptive parent or eligib lucation any requested information	le step-parent of the student. ation pertinent to this loan (e.g	
funds to the student's account.				
Student Signature		Date (month/day/year)		
		(· · · , · , - · · ,	
Parent Signature		Date (month/day/year)		
		FOR OFFICE USE ONLY		
	□St	aff Reviewed	Process Date:	
		ail Initials	Initials	

□Fax □E-Mail