

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

PLUS LOAN AUTHORIZATION FORM 2025 - 2026

STUDENT INFORMATION				
Student's Name	Please Prin	t	Middle Initial	
Telephone Number			Student ID Number	
	PARENT BORROWER I	NFORMATION		
Parent's Name	Please Prin	t	Middle Initial	
Street Address	City	State	Zip Code	
Telephone Number	Social Sec	urity Number	Birth Date	
Parent must sign a MPN with the Department of Edu check annually* at www.studentloans.gov (see "Reg school at the appropriate time. *Credit check information is only valid for 180	uest a PLUS Loan" instructions on t	his website). Upon approval		it
Chaskerse	LUAN PERI	00		
Check one: Academic Year* Fal Loan amounts for an academic year loan will be	I ONLY	Spring ONLY	Summer	
Loan recipients who drop below half		uested amount t to a cancellation of s	ubsequent loan disbursement	s.
	CERTIFICAT	ION		
I certify that all the information on this form of the information provided. I certify the par I authorize Northern Kentucky University to enrollment status, current address). I author funds to the student's account.	ent listed on this form is the bi release to the Department of I	ological/adoptive parent Education any requested	or eligible step-parent of the stud d information pertinent to this loar	lent. n (e.g.
Student Signature (Electronic	Signatures will not be acce	epted) Date	(month/day/year)	
Parent Signature (Electronic	Signatures will not be accept	oted) Date	(month/day/year)	
			FICE USE ONLY	
		Staff Reviewed Mail	ials Process Date:	als

□Fax □E-Mail