

## **Student Financial Services**

## 2023-2024 Federal Direct Parent Loan (PLUS) Certification Request Form

Student Name:	ID:
Daytime Phone: ()	
Parent Name:	
Street Address:	
City: State: _	Zip Code:State of Legal Residence:
Driver's License #:	Issuing State:
Daytime Phone: ()	Date of Birth:/
Parent's Citizenship Status (check o	one):US CitizenPermanent Resident
If Permanent Resident, US Alien #: /	4
	nt Requested: \$ The loan is certified for the amount requested or based on federal guidelines (whichever is less).
Note: Loan awards are based on the fo	lowing federal formula:
Cost of Attendance – Estimated Financi	al Aid = Loan Amount Eligibility
Loan Term Requested (check one):	Fall and SpringFall onlySpring only
	Spring and SummerSummer only
I authorize Polk State College to po	y the credit balance through my Bank Mobile account.
understand the financial decision or	money via a Federal Loan, and this loan must be repaid. Furthermore, I approval of the PLUS Loan is dependent upon a credit check performed by the U.S. the final decision is not controlled by Polk State College.
If my loan funds are not disbursed v check to be performed <b>Yes</b>	vithin 180 days of the approval of my PLUS Loan, I grant permission for a new credit <b>No</b>
I certify the information provided in	this document is true and correct to the best of my knowledge.
Signature of PARENT Borrower	
** Notification of Social Security N and for reporting to the National St	umber Collection and Usage: A Social Security Number is used for a credit check udent Loan Data Service.
INTERNAL USE ONLY: Federal Direc	· Parent Loan Cartification Paguest

The student must return the completed and signed form via email at financialaid@polk.edu, or via mail to: Polk State College ■ Office of Student Financial Services ■ 999 Ave H, N.E. ■ Winter Haven FL, 33881-4299.