Financial Aid & Scholarships
Tel: (318)473-6423 FAX: (318)473-6534

8100 Highway 71 South
Alexandria, LA 71302-9121

# Parent Plus Loan Application
## *2009-2010*

Student's Name _____ Student's SSN _____ Student's Email Address _____

***To be completed by the parent regarding the parent:***

Parent's Name _____ Parent's SSN _____ Date of Birth _____

Permanent Address _____ City _____ State _____ Zip _____

Email Address _____ Phone No. _____ Driver's License No. _____ State _____

Parent's Employer: Name:_____ Telephone:_____

Address:_____

Requested Amount:_____ ____Fall and Spring _____ Fall Only ____ Spring Only

Accounting Services has my permission to credit my son/daughter's account with financial aid excess of his/her tuition and fees. I understand that any refund in excess of his/her tuition and fees will be made in a timely manner. If your student does not have an account with Campus Federal, then the student's refund will be mailed to his/her address. (**No Checks Will Be Disbursed in Accounting**.) _____ Yes ____ No

_____ _____
Parent's Signature Date

You must also contact your lender for pre-approval. Please circle your lender choice below or provide if not listed complete the information below:

Lender Name: _____ Lender Code:_____

Contact Information such as name and phone number:_____

Please Circle One

| | | |
|---|---|---|
| AMS (833067) | Campus Fed. Credit Union (817558) | EdAmerica (831453) |
| LELA (805149) | Nellie Mae (829076) | NelNet Academic Loan (833669) |
| Regions (810612) | SallieMae Education Trust (802218) | Wachovia (830005) |