

## 2021-2022 Graduate Plus Loan Request Form

**A. STUDENT'S SECTION:**

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Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_ Social Security#: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**B. REQUIREMENTS:**

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**I certify that I meet or I will meet the student eligibility requirements below:**

- Complete the 2021-2022 FAFSA at [www.fafsa.gov](http://www.fafsa.gov).
- Complete the Entrance Counseling at [www.studentloans.gov](http://www.studentloans.gov).
- Complete the PLUS Loan Counseling at [www.studentLoans.gov](http://www.studentLoans.gov).
- Complete the Grad PLUS Master Promissory Note (MPN) also at [www.studentloans.gov](http://www.studentloans.gov).

**C. AMOUNT REQUESTING:**

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**I would like to request a loan for the following amounts:**

*(Note: Provide a specific dollar amount below or circle "maximum" if you wish your loan(s) maximized.)*

**FALL 2021**     \$ \_\_\_\_\_     OR     Maximum

**SPRING 2022**     \$ \_\_\_\_\_     OR     Maximum

**SUMMER 2022**     \$ \_\_\_\_\_     OR     Maximum

Please explain why you are requesting a loan: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**D. AUTHORIZATION:**

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**Consent to Obtain Credit Report:**

I consent to the U.S. Department of Education and its agents obtaining a report of my credit record and using the information from that report in determining whether to make a Direct PLUS Loan to me. I understand that I will be notified in writing of the results of the credit check with respect to my loan application.

\_\_\_\_\_  
**Student's signature (REQUIRED)**

\_\_\_\_\_  
**Date**

**Office Use Only**

Date Processed: \_\_\_\_\_ Initials: \_\_\_\_\_ Approved / Declined (circle action)

If declined, reason:  
\_\_\_\_\_

Return signed and completed form(s) or other documents to your local campus.

Main Campus: 3240 Fort Rd, Toppenish, WA 98948 Phone: (509) 865-8502 Fax: (509) 865-1853 Email: [financial\\_aid@heritage.edu](mailto:financial_aid@heritage.edu)