



2910 BEDFORD AVE. BROOKLYN, NEW YORK 11210. TELEPHONE (718) 951-4785. FAX (718) 951-4778

---

*WILLIAM D. FORD FEDERAL DIRECT GRADUATE PLUS LOAN PROGRAM*

**The Following requirements must be met before submitting a Graduate Plus Loan Request:**

\*\*\*If we receive a Graduate Plus Loan Request with one of these requirements missing your application WILL BE RETURNED. \*\*\*

- ✓ Must File a 2014-2015 FAFSA
- ✓ Must have completed any Verification requirements
- ✓ Must be registered for at least six (6) credits within their division
- ✓ Must be a matriculated student
- ✓ Must have received their maximum limit in unsubsidized loans for the academic year

**After the Graduate Plus Loan is Requested:**

- ✓ Must sign a Master Promissory Note (MPN) at [Studentloans.Gov](http://Studentloans.Gov)

**Office of Financial Aid**

Brooklyn College of the City University of New York  
2900 Bedford Avenue Brooklyn, New York 11210. Telephone (718) 951-5178 Fax (718) 951-4778

**OFFICE USE ONLY**

Collection date \_\_\_\_\_

In-person (initial) \_\_\_\_\_

Fax/Email (initial) \_\_\_\_\_

Mail (initial) \_\_\_\_\_

**2910 BEDFORD AVE. BROOKLYN, NEW YORK 11210. TELEPHONE (718) 951-4785. FAX (718) 951-4778****WILLIAM D. FORD FEDERAL DIRECT GRADUATE PLUS LOAN PROGRAM****STUDENT INFO: (Please print clearly) \*Incomplete Applications will be returned**Name \_\_\_\_\_ Social Security No. \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_  
Last First MI

Permanent Address Apt# City State Zip

Day Area Code/Telephone No. \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YY

E-mail Address \_\_\_\_\_ CUNY Empl ID# \_\_\_\_\_

**Indicate only the number of credits you expect to take for each semester to be covered by this loan application:****You are strongly urged to apply for the full academic year.**

- If you register for less than the credits indicated below your loan could be subject to a reduction in award.
- Requested loan amounts are divided into equal, but separate disbursements according to the indicated loan periods.

Summer '14: Summer session one: \_\_\_\_\_ credits Fall '14: \_\_\_\_\_ credits

Summer session two: \_\_\_\_\_ credits Spring '15: \_\_\_\_\_ credits

Requested Loan Amount: \$ \_\_\_\_\_

**Please indicate a dollar amount**Have you received your maximum limit in unsubsidized loans for the 2014-2015 academic year? ☐ Yes ☐ No

If no, please do so before applying for Direct Graduate PLUS Loans.

Employer's Name and Address Employer's Area Code/Telephone No.

I promise to pay to ED all loan amounts disbursed under the terms of this application, plus interest and other charges and fees that may become due. I understand that by accepting any disbursement issued at any time under this application, I agree to repay the loan associated with that disbursement. I understand that, within certain timeframes, I may cancel or reduce the amount of a loan by refusing to accept or by returning all or a portion of any disbursement that is issued. Unless I make interest payments, interest that ED charges on my loan during deferment, forbearance, or other periods will be added to the principal balance of the loan. If I do not make a payment on a loan made under this application when it is due, I will also pay reasonable collection costs, including but not limited to attorney's fees, court costs, and other fees. I will not sign this application before reading it in its entirety, even if I am told not to read it, or told that I am not required to read it. I am entitled to an exact copy of this application and the Borrower's Rights and Responsibilities Statement. My signature certifies that I have read, understand and agree to the terms and conditions of this application.

**I UNDERSTAND THAT THIS APPLICATION IS A REQUEST FOR A LOAN, AND THAT I MUST REPAY THIS LOAN.**

Student's Signature \_\_\_\_\_ Today's Date \_\_\_\_\_