



2019-2020 Request for Increase of PLUS Loan Funds

Complete and return this form to the Office of Financial Aid in person or via email at finaid@howard.edu.

Last Name	First Name	HU ID
Address (include apt. no)	City	State Zip
		Contact Number

Please indicate below the semester(s) and additional amount you wish to request for the 2019-2020 aid year:

Check all that apply: Fall 2019 Spring 2020 Summer 2020

Total Amount: \$ _____ or Maximum Eligibility

NOTE: *The decision on loan approval is made by the Department of Education*

Undergraduate Students: If this request pertains to a **Parent PLUS Loan**, the parent borrower's name and signature are required:

I certify that all the information reported is true and complete to the best of my knowledge. I understand that if all the information requested above is not provided, my request will be denied.

Please be sure to submit this document with handwritten signatures. Any typed signatures will not be considered as valid and may delay the processing of aid.

Parent Borrower's Full Name (print)

Parent Borrower's Signature

Date

Student's Signature

Date

Graduate Students (only): If this request pertains to a **Graduate PLUS Loan**, the student's signature is required:

I certify that all the information reported is true and complete to the best of my knowledge. I understand that if all the information requested above is not provided, my request will be denied.

Please be sure to submit this document with handwritten signatures. Any typed signatures will not be considered as valid and may delay the processing of aid.

Student's Signature

Date

For Office Use Only:	Received by: _____	Date: _____
(IPLUS)	<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Pending	FAA Initials: _____ Date: _____