

**THE UNIVERSITY OF OKLAHOMA**  
**STUDENT FINANCIAL CENTER**  
 1000 Asp Avenue, Room 105  
 Norman, Oklahoma 73019-4078  
 Phone (405) 325-9000 Fax (405) 325-7608  
[sfc@ou.edu](mailto:sfc@ou.edu)

**DIRECT PLUS LOAN REQUEST FORM**

Parent Name: _____	Parent SSN: _____
Address: _____	Parent Email: _____
City, State, Zip: _____	Student Name: _____
Parent Phone: _____	Student SSN: _____
	Student OU ID: _____

- This form must be completed and signed by the parent borrower.
- The student must be enrolled through O.U. in at least 6 credit hours at the time of disbursement.
- All PLUS loans are processed for fall and spring unless the student graduates in December.
- If you are seeking a PLUS loan for the summer term, please apply for a new PLUS loan at [studentloans.gov](http://studentloans.gov).
- Your PLUS loan cannot be increased if your credit has expired or you were approved with an endorser. You must apply for a new PLUS loan at [studentloans.gov](http://studentloans.gov).

**Indicate the PLUS loan change you are requesting below.**

Completion of this form is not a guarantee that your increase request will be approved. Additional steps may be required. **You cannot use this form if your PLUS loan was approved with an endorser.** You and your endorser must reapply for a new PLUS loan at [studentaid.gov](http://studentaid.gov) in order to increase your PLUS loan.

**Decrease** my PLUS loan amount to \$ \_\_\_\_\_

**Cancel** my PLUS loan in full \$ \_\_\_\_\_

**Cancel** my PLUS loan for fall \$ \_\_\_\_\_

**Cancel** my PLUS loan for spring \$ \_\_\_\_\_

**Increase** total PLUS Loan amount to \$ \_\_\_\_\_ or  Maximum amount available

**You will need to apply for a new PLUS loan if you are requesting an amount higher than your original PLUS credit approval, you were originally approved with an endorser, or your credit approval is expired.**

OTHER \_\_\_\_\_

**By signing this application, I agree to provide information that will verify the accuracy of the completed form. Also, as the parent borrower, I certify that I am the person identified by the parent signature.**

Parent Borrower Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**If persons completing this form purposely supply false or misleading information or signatures, those persons may be fined, sent to prison or both.**