

## 1. INSTRUCTIONS

This request is valid for any Parent PLUS Loan(s) that exist for the 2021-2022 academic year parent borrower in this request.

Incomplete forms will delay processing. If a section does not pertain to you, indicate zero or not applicable (N/A).

2. STUDENT	INFORMATION					
Last Name		First Name		Student Identification Number		
3. PARENT F	PLUS BORROWER INFORM	MATION				
Parent Borrower's Name				Parent Borrower's Social Security Number		
4. CHANGE	REQUESTS					
REQUEST TO (	CHANGE PARENT PLUS LOAN	AMOUNT				
	for the		from \$	to \$		
REQUEST TO (	CHANGE PARENT PLUS LOAN	MAILING ADDRESS				
Parent Street Address		City		State	Zip	
REQUEST TO (	CHANGE CREDIT BALANCE OF	PTION				
	IS will first be applied to the stud ther educationally related charge					
If there is a credit balance after your Parent PLUS has been applied to the student accord to whom do you want the school to pay the credit balance?				Int, Me (the PLUS borrower) The student		
5. CERTIFICA	ATION AND SIGNATURES					
Parent Borrowe	r Copy of Driver's License attache	d (REQUIRED):				
my signature be	ocument by anyone other than the low, I authorize the University of Promissory Note.					
Parent B	orrower Signature-Wet Signature	Required		Date		
	Print, sign and ema	il as a PDF form to fadocs@	oucr.edu. Proc	essing timelines apply.		