

**NORTH CAROLINA CENTRAL UNIVERSITY**  
**WILLIAM D. FORD PLUS (PARENT) LOAN INCREASE FOR 2017-2018**  
**Consent to Obtain Credit Report/Loan Confirmation**

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 by Direct Loans of the results of the credit check with respect to my loan application.

**The same parent that originally applied for the Plus Loan MUST be the same to apply for the increase.**

**SECTION A: PARENT'S SECTION**

Parent's Full Name: \_\_\_\_\_

Parent's Social Security # \_\_\_\_\_ Date of Birth (MM/DD/YYYY) \_\_\_\_\_

Relationship to Student:  Mother  Father  Aunt  Uncle  Grandmother  Grandfather  Other

Permanent Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent's Home Telephone #: ( ) \_\_\_\_\_ Work Phone #: ( ) \_\_\_\_\_

Parent's Email Address \_\_\_\_\_

Citizenship Status:  U. S. Citizen  Permanent Resident or Other Eligible Alien  
Alien Registration Number (if applicable) \_\_\_\_\_

**SECTION B: REQUESTED LOAN INCREASE AMOUNT**

Increase Plus loan by \$ \_\_\_\_\_  Fall Only  Spring Only  Fall & Spring

**SECTION C: STUDENT'S SECTION (Required)**

Student's Name (please print legibly) \_\_\_\_\_ Student's Banner ID or SSN# \_\_\_\_\_

Student's email address: \_\_\_\_\_

**SECTION D: PARENT'S SIGNATURE (Required)**

Parent's Name (please print legibly): \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**YOU MAY FAX THIS FORM TO (919) 530-7959**