DELAWARE
COLLEGE OF ART
AND DESIGN

DCAD

FOUNDED THROUGH A
CREATIVE PARTNERSHIP OF
PRATT AND THE CORCORAN

How to apply for DIRECT Parent PLUS Loans

OPTION 1:

- Complete Parent PLUS Loan Application Form and submit to DCAD Financial Aid Office for Credit Check
- DCAD Financial Aid Office emails Parent Credit Check Results

OPTION 2:

- Go to **www.studentloans.gov**
- Enter or Create FSA ID
- Select **Direct Parent PLUS** Application
- Complete **Parent PLUS Master Promissory Note** (MPN)
- **DCAD Financial Aid Office will receive results via the Department of Education**

Note: DCAD Financial Aid Office will notify Bursar and certify your Parent PLUS loan for disbursement to your DCAD student account later this summer.

Questions:
Call Financial Aid Office
302-622-8867
Ext 105 or 122

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DIRECT PARENT PLUS LOAN APPLICATION

COMPLETE THIS FORM IF YOU WISH TO HAVE YOUR DIRECT LOAN CREDIT CHECKED.

A. Borrower's Information (pleases type or print clearly in blue or black ink):
PARENT REFERS TO THE DEPENDENT STUDENT'S NATURAL MOTHER OR FATHER, CUSTODIAL STEPPARENT OR ADOPTIVE PARTENT.

☐MOTHER   ☐FATHER   ☐STEPMOTHER   ☐STEPFATHER

_____
FIRST NAME   MI   LAST NAME

_____
MAILING ADDRESS (NO PO BOXES)

_____
CITY   STATE   ZIP CODE

_____
HOME PHONE NUMBER   CELL NUMBER   EMIAL ADDRESS

_____/_____/_____
SOCIAL SECURITY NUMBER   DOB MM / DD / YY

Are you currently in default on a federal education loan or owe a refund on a federal student grant?   ☐YES   ☐NO

B. Student's Information (please print clearly):

_____
FIRST NAME   MI   LAST NAME

_____
HOME PHONE NUMBER   CELL NUMBER   EMAIL ADDRESS

_____/_____/_____
SOCIAL SECURITY NUMBER   DOB MM / DD / YY

Year at DCAD   1st year   2nd year   SPECIFY SCHOOL YEAR

Are you currently in default on a federal education loan or owe a refund on a federal student grant?   ☐YES   ☐NO

C. General Processing Information:

Total Parent PLUS Loan amount request: $_____

Issue any overpayment refunds to: ☐ **Parent**   ☐ Student

Loan request for (check all that apply) ☐ Fall _____   ☐ Spring _____   ☐ Summer _____
                                         Year   Year   Year

Planned enrollment (check all that apply) ☐ Fall _____   ☐ Spring _____   ☐ Summer _____
                                           Year   Year   Year

D. U.S. Citizenship Status (check one):

U.S. Citizen Status: ☐ US Citizen or **National** ☐Permanent Resident or Eligible Non-Citizen _____   ☐ Neither

I certify that the information provided on this form is complete and correct to the best of my knowledge. I authorize DCAD to perform a credit check with the Department of Education to review my eligibility for the Direct Parent Plus Loan.

_____
PARENT BORROWER'S SIGNATURE   DATE

Send your completed form to the DCAD Financial Aid Office – ATTN Direct PLUS via fax or mail:
Fax: 302-792-7101 Mail: DCAD, 600 North Market St, Wilmington, DE 19801