

Blinn College

PLUS Authorization Form

NO PLUS LOAN FUNDS WILL BE PAID UNTIL THIS SIGNED FORM IS RETURNED

I authorize Blinn College to
(Select only one option)

Apply all PLUS loan funds toward the payment of tuition, fees, room and board, or any other charges billed by Blinn College and to refund any remaining funds to the student.

Apply all PLUS loan funds toward the payment of tuition, fees, room and board, or any other charges billed by Blinn College and to refund any remaining funds to the parent.

I understand that I make this statement voluntarily and I have the right to rescind this request in writing as it pertains to the method for refunding credit balances.

Student Name (Print)

Student Social Security #

Blinn ID #

Parent Name (Print)

Parent Social Security #

Parent Address

City, State, Zip Code

Parent Signature

Date

ATTENTION: By signing this form you authorize Blinn College to credit proceeds from a PLUS loan to your dependent student's account. All proceeds will be refunded according to the selection you made above. This form must be completed for each academic aid year in which the borrower is approved for a PLUS loan.

RETURN COMPLETED FORM TO: Blinn College - Office of Student Financial Aid
902 College Ave
Brenham, Texas 77833
(979) 830-4144
Fax (979) 830-4149