BLESSING-RIEMAN
College of Nursing & Health Sciences

Federal Direct PLUS Loan Data Sheet

Parent Borrower Information:

Parent Name: _____

Last 4 of SSN: _____   **Email Address:** _____

Address: _____   **City, State, Zip:** _____

Student Information:

Student Name: _____

Last 4 of SSN: _____

Loan Period
Please check an option below indicating the intended loan period for this loan request.

☐ Fall 2025/Spring 2026 (year loan) ☐ Fall 2025 (Only) ☐ Spring 2026 (Only) ☐ Summer 2026 (Only)

Requested Loan Amount

Please indicate your requested loan amount below. We recommend that you always borrow conservatively. We will always process subsidized loans first; if you do not qualify for a subsidized loan, we will automatically process an unsubsidized loan.

Requested Loan Amount: $ _____

PLUS Loan Requirements

1. Complete PLUS Application (credit check) online at www.studentaid.gov.
   (Required each academic year.)
2. Complete a Federal Direct Loan Program Master Promissory Note online at www.studentaid.gov.
   (Required for ALL first-time borrowers.)
3. Complete this PLUS Loan Data Sheet and return to the BRCN Financial Aid Office.

Certifications & Signature

I certify that I have read and completed all requirements indicated on this PLUS Loan Data

Sheet. I authorize BRCN to certify and disburse the above requested amount.

_____   _____

Parent Borrower Signature of Legal Name   Date