

Student Name (please print clearly)

PNWU Student ID

I give consent to the U.S. Department of Education and its agents to obtain a report of my credit record and to use the results in the determination of my Graduate PLUS Loan. I understand that I will be notified in writing by the Direct Loan Servicing Center of the results of the credit check and options with respect to my loan application.

Student or Endorser Section (please circle one)

Social Security Number	Date of Birth			
Last Name	First Name		MI	
Address				
City	State	Zip		
Phone Number (including area code)	Relationship t	o Student		
Signature of Borrower	Today's Date			

Pursue the Graduate PLUS Loan by appealing the credit decision to the Department of Education (I understand I will receive an email from PNWU giving more information)

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Pursue the Graduate PLUS Loan by obtaining an endorser (I understand I will receive more information about the endorser process from PNWU and the Department of Education)

Privacy Act Disclosure Notice

The Privacy Act of 1974 (5 U.S.C.552a) requires that the following notice be provided to you. The authority for collecting the information requested on this form is §451 et seq. of the Higher Education Act of 1965, as amended. Your disclosure of this information is voluntary. However, if you do not provide the information, you cannot be considered for a Direct PLUS Loan. The information on this form will be used to determine your eligibility for a Direct PLUS Loan. The information in your file may be disclosed to third parties as authorized under routine uses in the Privacy Act notices called "Title IV Program Files" (originally published on April 12, 1994, Federal Register, Vol. 59 p. 17351) and "National Student Loan Data System" (originally published on December 20, 1994, Federal Register, Vol. 59 p. 65532). Thus, this information may be disclosed to federal and state agencies, private parties such as relatives, present and former employees and creditors, and contractors of the Department of Education for purposes of administration of the student financial assistance program, for enforcement purposes, for litigation where such disclosure is compatible with the purposes for which records were collected, for use by federal, state, local, or foreign agencies in connection with employment matters or the issuance of a license, grant, or other benefit, for use in any employee grievance or discipline proceeding in which the Federal Government is a party, for use in connection with audits or other investigations, for research purposes, for purposes of determining whether particular records are required to be disclosed under the Freedom of Information Act, and to a Member of Congress in response to an inquiry from the congressional office made at your written request. Because we request your social security number (SSN), we must inform you that we collect your SSN on a voluntary basis, but section 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) provides that, in order to receive any grant, loan, or work assistance under