



## FEDERAL DIRECT PLUS LOAN REQUEST FORM

Student ID#	Last Name	First Name, M.I.
_____	_____	_____

Expected Graduation Date	Enrollment Period Covered by this Loan
_____/_____/_____ Month Year	From ____/____/____ To ____/____/____ Month Year Month Year

PLUS Loan Request Amount:	\$_____
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I am requesting a loan for the enrollment period and amount indicated above for which I am eligible to borrow.

I understand that in order to obtain a loan through this process, I must complete a Federal Direct PLUS Loan Credit Check and a Federal Direct PLUS Loan Master Promissory Note, which contains my promise to repay the loan.

By accepting this Federal Direct PLUS Loan, I authorize Stanford University to submit my information to the Department of Education to investigate my credit record and report information about my loans to persons and organizations permitted by law to receive that information for the purpose of determining eligibility for this Direct PLUS loan.

I also authorize Stanford Law School to transfer the loan proceeds received by EFT (Electronic Funds Transfer) to my student account.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Please submit to: Office of Financial Aid  
[financial.aid@law.stanford.edu](mailto:financial.aid@law.stanford.edu)  
650/723-0838 (fax)