

***Authorization to Obtain a Credit Report
For Federal Direct Plus Loans***

SCHOOL NAME: Kirkwood Community College

School code: 004076

School Financial Aid Office Fax Number: (319) 398-4928

Phone Number: (319) 398-7600

Please Print

Parent Borrower Information:

Last First M.I.

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Permanent Street Address: _____

City/State/Zip Code: _____

Home Phone No: (____) _____ - _____ Work Phone No: (____) _____ - _____

Citizenship Status: _____ Citizen/National _____ Eligible Non-Citizen

Student Information:

Name: Last First M.I.

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Loan Period: From: 08/20/2019 To: 05/10/2020
(MM/DD/YY) (MM/DD/YY)

I authorize Kirkwood Community College and the Department of Education, to obtain a credit bureau report for the purpose of making a preliminary credit determination of my eligibility for a Federal Direct PLUS loan. I understand that if conditionally approved, I must submit a signed, completed Application and Promissory Note and other forms as directed by the school.

Parent's Signature

Date Signed