



**2009-2010**

**Federal Direct Graduate PLUS Loan Request Form**

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\_\_\_\_\_  
**Student's Name (Please Print)**

\_\_\_\_\_  
**Date of Birth (MM/DD/YYYY)**

Have you submitted a Free Application for Federal Student Aid (FAFSA) for the 2009-2010 Academic Year?     Yes     No

*Please note that a graduate PLUS loan application cannot be processed until the student's aid application is evaluated by the Financial Aid Office. The FAFSA must be submitted.*

**Loan Information**

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Please indicate the loan period to which you wish to apply your loan:

- Academic Year 2009-2010 [Fall and Spring Semesters: this loan will be disbursed in equal installments each semester]
- Fall Semester only
- Spring Semester only

Loan amount requested    \$ \_\_\_\_\_ . 00

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**Consent to Obtain Credit Report**

I consent to the U.S. Department of Education and its agents obtaining a report of my credit record and using the information from that report in determining whether to make a Direct PLUS loan to me. I understand that I will be notified in writing of the results of the credit check with respect to my loan application.

**Borrower (Student)**

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Social Security Number

(\_\_\_\_\_)\_\_\_\_\_  
Phone Number (Day-time)

\_\_\_\_\_  
Email Address

Check below the ONE option you would choose in the event your Graduate PLUS application is denied due to results of your credit check:

- Use an endorser (credit worthy co-signer)
- Take no further action

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 this information, you cannot be considered for a Direct Graduate PLUS Loan.

**X** \_\_\_\_\_  
Signature of Borrower

\_\_\_\_\_  
Date

Return This Form To:    Peabody Conservatory of Music  
Office of Financial Aid  
1 E. Mount Vernon Place  
Baltimore, MD 21202  
FAX 410-659-8102