**Graduate Information**

Has the student filed a 2019-2020 FAFSA?  
- [ ] Yes  
- [ ] No  

*You are required to file a FAFSA to receive this loan.*

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<tr>
<th>Name</th>
<th>Last</th>
<th>First</th>
<th>Middle Initial</th>
<th>ECU Banner ID</th>
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Phone number __________________________

Have you ever been convicted of the possession or sale of illegal drugs?  
- [ ] Yes  
- [ ] No  

If yes, did the offense occur while you were receiving federal student aid?  
- [ ] Yes  
- [ ] No  

Graduate PLUS Loan Period:

*When selecting Summer 2020 Student must submit a separate ECU Summer Financial Aid Application.*

- [ ] Summer 2020 only

Amount you wish to borrow for loan period indicated above:  
*If no amount is provided the maximum will be offered*  

$______________________________

* Actual disbursed amount is reduced by a 4.236% loan processing fee. If amount requested exceeds the student’s estimated cost of attendance, it will be reduced accordingly.*

**Graduate Authorizations:** Your signature authorizes the initiation of the mandatory credit review required for the Graduate PLUS Loan. In addition, 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 section 451 et. Seq. of the Higher Education Act of 1965, as amended. Your disclosure of information is voluntary. However, if you do not provide this information, you cannot be considered for a Graduate PLUS Loan. The information on this form will be used to determine your eligibility for a Graduate PLUS Loan.

- [ ] Yes, I authorize the University Cashier’s Office to use the proceeds of my PLUS loan to pay all current year charges for tuition, fees, room and board and any other outstanding charges owed to the University at the time the funds are applied. I understand that this approval may be rescinded at any time and is for the duration of this loan.

- [ ] No, I choose to use the proceeds of my PLUS loan to pay only tuition, fees, room and board. I understand that if my student has other outstanding University charges, my PLUS loan will not cover those costs. Further, I understand that outstanding charges not paid by the due date will result in the cancellation of my student’s class schedule.

Student Signature __________________________ Date __________________________

Student Printed Name __________________________

Due to Federal Privacy Regulations regarding email and the protection of your personal information, we urge you to send documents to our secure FAX at 252-328-4347 or mail all documents to Office of Student Financial Aid, MS510, East Carolina University, Greenville, NC 27858. For materials that may contain a social security number, please cover or remove all but the last four digits. For materials with the date of birth, please cover or remove the year. If you have any questions, please contact our office at 252-328-6610.