



## 2016 – 2017 Aid Year Grad PLUS Loan Request

Student Full Name \_\_\_\_\_

Student ID Number **T#**: \_\_\_\_\_

Fall 2016 \_\_\_\_\_

Spring 2017 \_\_\_\_\_

Summer 2017 \_\_\_\_\_

Requested Loan Amount     \$ \_\_\_\_\_

**The Student's eligibility may require the certified loan amount to be less than the requested loan amount.**

☐ Credit Check Authorization

By checking this box, you are authorizing Southern Utah University to run a credit check on your behalf to determine Grad PLUS Loan eligibility.

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

Please fill out and submit it to the Financial Aid Office  
351 W. University Blvd • Cedar City, UT 84720 • (435) 586-7736 (fax)

RRAAREQ Code: GRDPLS