

University of South Carolina Beaufort

Financial Aid/Veterans Affairs Office 801 Carteret Street ♦ Beaufort, SC 29902

Office: 843-521-3104 **♦ Fax:** 843-521-3194 **♦** www.uscb.edu

Email: uscbfina@uscb.edu

PLUS Default/Overpayment Borrower Statement

In order for our office to certify your Federal PLUS Loan application, additional information is needed. The parent applicant of the Federal PLUS Loan must complete all sections of this form and return it to our office as soon as possible to avoid any delays. Do not leave any questions blank or unanswered. If you have any questions or need further assistance, please contact our office.

	Student's In	formation	
Student (Legal Name):		
Last Name	First Name	Middle Name	Date of Birth
	Parent Borrower	°s Information	
Parent Borrower's Na	nme (Legal Name):		
Last Name	First Name	Middle Name	Last 4 Digits of SSN
Parent's Email Address			Relationship to Student
Are vou in default on	a Federal Education Loan?	☐ Yes	□ No
•	on a Federal Education Grant?	□ Yes	□ No
education; {2} that I an {3} that I do not owe m to notify my school if I than one college for the my completed form. understand that the Secr Internal Revenue Service. By signing this document	oral and/or state student financial aid in not in default on a federal student noney back on a federal student gran default on a federal student loan; { same period of time. I agree, if asker information may include my retary of Education has the authority the and other Federal Agencies. Int, I certify that all the information retain on this document, it will be caus	loan or have made satisfactor have made satisfactors? that I will not receive ed, to provide information federal and/or state incomparts to verify information represented on it is true and a	factory arrangements to repay it; arrangements to repay it; a Federal Pell Grant from more in that will verify the accuracy of ome tax forms. I certify that I orted on this application with the accurate. If I purposely give false
Parent's Signature		Date	