	FINANCIAL AID OFFICE		finaid@gccck	s.edu • (620)-276-9519 • Fax (620)-276-9650 801 Campus Drive
	GARDEN CIT	Y		801 Campus Drive Garden City, Kansas 67846 www.gcccks.edu
SM			JS Loan Acc	eptance Form
All first-time Parent PLUS borrowers must complete a Federal PLUS Loan Master Promissory Note (MPN) at <u>https://studentaid.gov</u> and PLUS Application.				
PARENT NAME (on	e parent only)			
ADDRESS				
CITY	STATI	E ZIP_		PHONE
STUDENT NAME				
GCCC STUDENT ID# (DR SSN #		STUDENT DA'	TE OF BIRTH
STUDENT LOCAL A	DDRESS			
CITY	STATI	E ZIP_	LOC	CAL PHONE #
Indicate the semester(s) for which you are borrowing a loan:				
*Fall/S (Aug. 2024	pring – May 2025)	Fall Or (Aug. 2024	lly – Dec. 2024)	Spring Only (Jan. 2025 – May 2025)
Indicate the TOTAL amount of Federal PLUS Loan you are requesting: \$				
PARENT SIGNATU Parent PLUS Loan fun		tional charges @	Garden City Com	DATE munity College before any refund will be issued.
DEADLINES FOR SUBMITTING LOAN REQUIREMENTS: FALL ONLY LOANS- DECEMBER 3, 2024 <u>OR</u> 7 BUSINESS DAYS PRIOR TO THE STUDENT'S LAST DAY OF ATTENDANCE, WHICHEVER OCCURS FIRST. FALL/SPRING AND SPRING ONLY LOANS- MAY 6, 2025 <u>OR</u> 7 BUSINESS DAYS PRIOR TO THE STUDENT'S LAST DAY OF ATTENDANCE, WHICHEVER OCCURS FIRST. PLUS LOANS CANNOT EXCEED STUDENTS ESTIMATED COST OF ATTENDANCE Contact the Financial Aid Office to get the maximum amount available to you.				