



2017-2018 Federal Direct Parent PLUS Release of Funds to Student Authorization

Lansing Community College
Gannon Suite 261 – Financial Aid
411 N. Grand Ave
Lansing, MI 48933
Phone: (517) 483-1200 (option 1)
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Student Name: _____

Student Username: _____

Parent Borrower Release of Funds Authorization

I certify that I, _____, authorize LCC to refund Federal Direct Parent PLUS loan funds to my son/daughter. I understand that only funds not used to pay direct LCC costs will be refunded.

Parent Signature: _____ Date: _____

For Notary Use Only

State of _____ City/County of _____

On _____, before me, _____, personally appeared _____, and
(Date) (Notary's Name) (Printed Name of Signer)

proved to me on the basis of satisfactory evidence of identification _____ to be the
(Type of unexpired Government-Issued photo ID provided)
above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

Notary Signature: _____ My Commission Expires On: _____