

Name: _____

Parent Signature:

2025 – 2026 Federal Direct Parent PLUS Release of Funds to Student Authorization

Lansing Community College Financial Aid Office Gannon Building Suite #2306 411 N. Grand Ave. Lansing, MI 48933 Ph: (517) 483-1200 (Option 1) Fax: (517) 483-1170 financialaid@lcc.edu

Username: _____

Parent Borrower Release of Funds Authorization			
I certify that I,	, authorize LCC to	refund Federal Direct Parent PLUS loan funds to the	
student. I understand that only funds not used to pay direct LCC costs will be refunded.			
This document must have a physical, wet signature from the applicant of the Federal Direct Parent PLUS Loan, and it			
must be witnessed by a notary. The signature cannot be electronic/computer generated.			
For Notary Use Only			
Tor Notary use offing			
State of	te of City/County of:		
On	, before me,	personally appeared, (printed name of signer)	
(date)	(Notary's Name)	(printed name of signer)	
and proved to me on the basis of satisfactory evidence of identification			
	the same of sams factor, evidence of factor	(type of unexpired Government-Issued photo ID provided)	
to be the above named person who signed the foregoing instrument.			
WITNESS my hand and official seal			
,			
Notary Signature:	Му	My Commission Expires On:	

Date: _____