

2022-2023

Parent PLUS Loan Refund Authorization

Student's Name (PRINT):			Phone: ()	
HCC ID:(9-digit number required)	Date of Birth:/	/	Home Campus:		
(9-digit number required)			(Prim	ary location of attendance)	
Federal law requires that any e writing) by parent borrower to			ned to the parent borrov	ver unless authorized (in	
TO BE COMPLETED BY T	HE PARENT BORROW	/ER ONLY	':		
By completing and returning that account which resulted from yo	-	-	ions below for the refund	I on your student's	
Please check the appropriate o	ption:				
☐ Refund to Student			☐ Refund to Parent (Borrower)		
PLEASE PRINT					
Parent (Borrower) Name:					
Parent (Borrower) Address:					
Parent (Borrower) Signature: _					
This authorization is v	valid for the current and dent is enrolled at H		-	eriod in which the	
Please return this	form to your Housto	on Comm	unity College Finan	cial Aid Office.	
	Cer	tification			
By signing below, I/we acknow	=				
false or misleading information whose information was reported to the control of				is dependent, one parent	
Parent Signature:			Date	:	

HCC is committed to a workplace and educational environment free of discrimination and harassment based upon race, color, religion, age, sex, gender, national origin, disability, status as a veteran, or sexual orientation. Phone: 713-718-8490

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