2023-2024



Parent PLUS Loan Refund Authorization

Student's Name (PRINT):			Phone: ()	
HCC ID:(9-digit number required)	Date of Birth:/		Home Campus:	imary location of attendance)	
Federal law requires that any e writing) by parent borrower to			urned to the parent borro	ower unless authorized (in	
TO BE COMPLETED BY T	HE PARENT BORROV	VER ONI	.Y:		
By completing and returning the account which resulted from y			otions below for the refu	nd on your student's	
Please check the appropriate o	option:				
☐ 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		=		
Please return this	s form to your Housto	on Comi	nunity College Fina	ncial Aid Office.	
	Cei	rtification			
By signing below, I/we acknow false or misleading informatio whose information was reported.	n may result in federal fin	ies, jail ser	ntence, or both. If stude		
Parent Signature:			Da	te:	

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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