



Office of Financial Aid
Willamette University
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2024-2025 Graduate PLUS Credit Authorization

Student Name

WU ID or Date of Birth

By signing below I consent to the U.S. Department of Education and its agents obtaining a report of my credit record and using the information from that report in determining whether to make a Direct Graduate PLUS Loan to me. I understand that I will be notified in writing of the results of the credit check with respect to my loan application.

Signature

Date