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2025-2026 PARENT PLUS FUNDS AUTHORIZATION FORM

Student's Last Name	Student's First Name	M.I.	Oxy ID or Last 4 Digits of SSN
I hereby authorize Occidental (PLUS Loan) disbursement to (including prior year charges of meal plan (if applicable). Examplessons, Occidental Student H	pay for my student's allowant of \$200 or less) other than to oples of such charges are lik	able educa tuition, fee orary charg	tionally related charges s, on-campus housing and a ges, parking fines, music
I make this request voluntarily housing and/or meal plan (if a understand that a detailed acc College Student Business Serv	pplicable) and other charge counting of these funds is a	es will be pa	
	ncel or modify this authoriz ff. I may refuse to authorize on of this authorization will	ation in wr e any indivi not be retr	iting with Occidental College idual item on this statement but oactive; it would take effect the
PLEASE NOTE THAT OUR OFFICE (WET SIGNATURE) AND UPLOAD BE EMAILED DIRECTLY TO OUR O	YOUR COMPLETED FORM TO	DOC. TH	TURES. PLEASE PRINT, SIGN HIS PARTICULAR FORM MAY ALSO
Parent's Signature	Print Name		Date