

2016 - 2017 BORROWER ACKNOWLEDGEMENT

| Name: | CWID: | | |
|---|--|---|--|
| Address: | City | State | |
| Street | City | State | Zip Code |
| Phone: | Email: | | |
| permanent/total disabilit gainful activity before an | udents who have had previous Federal Di y must provide a statement acknowledging y new Federal Direct Student loans can be er, Vol 59, No 228, Tuesday, November 2 | g their ability to engage awarded by the schoo | e in substantial ol they are |
| Please complete this for | if you are seeking to borrow a new Feder | ral Direct Student loar | n and had |
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| federal loans that were p In addition, the 2 nd page to be considered comple I, | eviously discharged. of this form must be completed by a lice the and valid. , the borrower, ac | nsed physician in orde | |
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Student Signature



2016 - 2017 PHYSICIAN CERTIFICATION

The U.S. Department of Education regulations allow students to discharge their federally regulated student loans based on permanent/total disability. The definition of permanent/total disability is, "the borrower must be unable to work and earn money or go to school because of injury or illness that is expected to continue indefinitely or result in death. The total disability cannot be based on a condition that existed before the borrower applied for the loan, unless the condition has since substantially deteriorated ".

The U.S. Department of Education will allow students who have had federally regulated loans discharged due to permanent/total disability borrow additional funds, providing the student:

- 1. "Obtains a certification from a licensed physician that the borrower IS able to engage in substantial gainful activity (defined as attending school, successfully completing the program and securing employment to repay the new loan) and;
- 2. Sign a statement acknowledging that the loan the borrower receives cannot be discharged in the future on the basis of any impairment present when the new loan is made, unless that impairment substantially deteriorates" (Federal Register, Vol 59, No 228, Tuesday, November 20, 1994, Rules and Regulations, 61215).

who has had federally regulated student loans discharged based on permanent/total disability (see bullet 1 above), has *improved enough* to allow him/her to engage in substantial gainful activity (bullet 2 above).

Warning: Any person who knowingly makes a false statement of misrepresentation on this form shall be subject to penalties which may include fines or imprisonment under Title 20, United States Criminal Code, Section 1097.

Signature of Physician (M.D. or D. O.)

Date

Please print or type the following information:

Physician's Name

Physician's Address _____

Physician's Phone