

## 2015-2016 Statement of Disability Discharge Verification (part 2)

<b>Physician's Statement</b> Use in	nk only.		
Student Information: Name:		·	
Date of Birth:			
Social Security Number:			
Student ID Number:			
Request to re-establish Federal Student Loan loan(s) due to total and permanent disability	Eligibility after discharge	e of prior edu	cational
According to the NSLDS (www.nslds.ed.gov) federal educational loans has been discharged discharge means that the borrower may not be unless eligibility is re-established by submittin stating that the borrower is no longer totally an acknowledging that the borrower will repay fu	due to total and permaner considered for further fe ag a statement from a legand and permanently disabled a	nt disability. deral student ally licensed p	This loans
Physician Statement The above referenced borrower was previously and received a discharge of their student loans now requesting more student loans from the ferfollowing question as required by the U.S. Dep	because of the classificated deral government. Please	tion. The bor	rower is
Is the borrower no longer considered to be total disabled and, therefore, able to engage in subst	• •	Yes	No
The phrase "substantial gainful activity" means a level of physical or mental activities or a combination of both. NOTE: This standard may be different from standards us with occupational disability or eligibility for social servi	sed under other private and pu		
Comments:			
Physician's Printed Name	Physician's Signature		
Complete Address	City/State/Zip	Phone	
Date			