

## 2021-2022 Statement of Disability Discharge Verification (part 1)

### **Borrower's Request**

Use ink only.

Request to re-establish Federal Student Loan Eligibility after discharge of prior educational loan(s) due to total and permanent disability

Student Information:

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

According to your NSLDS ([www.nsls.ed.gov](http://www.nsls.ed.gov)) record, one or more of your prior federal educational loans has been discharged due to total and permanent disability. This discharge means that you may not be considered for further federal student loans unless you reestablish eligibility by submitting this form signed by you, and a statement from a legally licensed physician stating that you are no longer total and permanently disabled.

### **Student Certification**

I certify that I am aware that any new federal educational loans that I borrow cannot be discharged in the future on the basis of any impairment present at the time the new loan is accepted unless my impairment substantially deteriorates. In addition, acceptance of a new federal educational loan may prevent final discharge of prior educational loans that were conditionally discharged due to total and permanent disability after July 1, 2002. I understand that I must sign the statement for each new loan for which I apply.

I am aware that collection activity will resume on any loans still in a total and permanent disability conditional discharge period and that I am responsible for repayment of these loans.

I understand that I must cancel all of my pending requests for loan discharge based on disability.

I understand that I must submit a statement from my physician stating that I am no longer totally and permanently disabled.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Complete Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone



## 2021-2022 Statement of Disability Discharge Verification (part 2)

### Physician's Statement

Use ink only.

Student Information:

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Request to re-establish Federal Student Loan Eligibility after discharge of prior educational loan(s) due to total and permanent disability

According to the NSLDS ([www.nsls.ed.gov](http://www.nsls.ed.gov)) record, one or more of this borrower's prior federal educational loans has been discharged due to total and permanent disability. This discharge means that the borrower may not be considered for further federal student loans unless eligibility is re-established by submitting a statement from a legally licensed physician stating that the borrower is no longer totally and permanently disabled and a form acknowledging that the borrower will repay future loans.

### **Physician Statement**

The above referenced borrower was previously classified as totally and permanently disabled and received a discharge of their student loans because of the classification. The borrower is now requesting more student loans from the federal government. Please respond to the following question as required by the U.S. Department of Education.

Is the borrower no longer considered to be totally and permanently disabled and, therefore, able to engage in substantial gainful activity?      Yes      No  
     

The phrase "substantial gainful activity" means a level of work performed for pay that involves doing significant physical or mental activities or a combination of both.

NOTE: This standard may be different from standards used under other private and public programs in connection with occupational disability or eligibility for social services.

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Physician's Printed Name

\_\_\_\_\_  
Physician's Signature

\_\_\_\_\_  
Complete Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Date