



2026-2027 Federal Loan Discharge Acknowledgment

STUDENT INFORMATION

Student Name	Student ID
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Our records indicate that you have applied for financial aid. Through that process it has been determined, by the National Student Loan Data System (NSLDS), that you have had prior federal student loans discharged due to total and permanent disability (TPD). In order for our office to process additional federal student loans for you, in accordance with federal regulation (682.402c), you are required to provide a letter from your physician certifying that you are able to engage in substantial gainful activity. In addition to the certification from your physician you must also sign the borrower acknowledgment statement below.

The physician’s statement is required to be completed exclusively by a licensed Doctor of Medicine (MD) or Doctor of Osteopathic Medicine (DO).

This form must be completed each time you request a federal student loan; however, completion of this form does not guarantee that you will qualify for any federal student loans. If you are unable to provide the certification from your physician, you will not be eligible to receive any additional federal student loans.

BORROWER ACKNOWLEDGEMENT STATEMENT

I acknowledge that I have previously received a total and permanent disability discharge either through the Federal Family Education Loan Program, William D. Ford Direct Loan Program, or Federal Perkins Loan Program.

I understand that if I have not successfully completed the post-discharge period for my previously discharged loans, I may be required to begin repayment of those loans.

I understand that before I can receive any federal student loans, I must obtain a physician’s certification stating that I can engage in substantial gainful activity. *Certification is required only once prior to borrowing a new federal student loan.*

I understand that any additional federal student loans I receive must be repaid in full and/or the TEACH Grant service obligation cannot be discharged in the future on the basis of any impairment present when the new loan is made unless that impairment substantially deteriorates as determined by a physician.

I understand that a borrower’s acknowledgement statement must be completed each term a federal student loan is requested and received.

By signing this form, I am certifying that I have read the above Borrower Acknowledgment statement.

Student Signature

Date

For Institutional Use:
Physician’s Certification on File: Yes No (requested from student)