

VIRGINIA PENINSULA COMMUNITY COLLEGE

Federal Loan Discharge Borrower Acknowledgement

First Name	Last Name	EMPLID	Last four SSN
------------	-----------	--------	---------------

The National Student Loan Data System (studentaid.gov) indicates that you have one or more federal student loans and/or TEACH Grant service obligations discharged because of a total and permanent disability. *You must submit a Physician's Certification of Borrower's Ability to Engage in *Substantial Gainful Employment form to the Financial Aid Office.*

Each time you wish to receive an additional federal student loan while attending Virginia Peninsula Community College, you must complete this form and submit it to the Financial Aid Office (physician certification is only required one time). It is your responsibility to initiate a new loan request by completing and submitting a new form.

Definitions:

➤ Federal student loans:

One or more of the following loans: Direct Subsidized Loans, Direct Unsubsidized Loans, Direct PLUS Loans for parents of dependent undergraduate students and for graduate or professional students, Direct Consolidation Loans, and Federal Perkins Loan.

➤ Total and Permanent Disability:

Total and permanent disability is the condition of an individual who:

Is unable to engage in substantial gainful activity by reason of a medically determinable physical or mental impairment that can be expected to result in death; has lasted for a continuous period of at least 60 months; or can be expected to last for a continuous period of at least 60 months;

OR

Has been determined by the Department of Veterans Affairs (VA) to be unemployable due to a service-connected disability.

➤ *Substantial Gainful Activity:

A level of work performed for pay that involves doing significant physical or mental activities or a combination of both.

Borrower Acknowledgement

I, _____ acknowledge that:

1. I am applying for one or more federal loans for the award year _____;
2. I currently have the ability to engage in substantial gainful activity as defined in this acknowledgment form in order to repay the new loans;
3. Any federal loan(s) I receive as a result of a physician's certification of my ability to engage in substantial gainful activity cannot be discharged based on any present impairment unless that present impairment or conditions deteriorates so that I again meet the definition of having a total and permanent disability; **AND**
4. If I request a new loan during the post-discharge monitoring period or conditional discharge period, I must resume payment on the old loan before receipt of the new loan.

Borrower Certification:

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

Student Signature

EMPLID

Date

Institutional Use:

Physician's Certification on File: Yes No – Requested from student