

The National Student Loan Data System (NSLDS) indicates that you have had a federal loan discharged due to total and permanent disability. Before processing of your FAFSA application can continue, you must complete this form to verify your intent to receive new federal financial aid and acknowledge the related conditions. A separate submission is required for each individual academic year.

Student's First Name	Initial (optional)	Last Name			
Please select the group based on the first letter of your last name		A-C	D-J	K-R	S-Z
Student ID# (Usually L followed by 8 numbers)	Phone				
Academic Year	2020-2021	2021-2022			

Please check the appropriate option below (select ONE):

I am not seeking federal aid at this time.

I am not seeking a new Title IV federal student loan more than three years after official discharge of my prior loan(s), or at any point after a loan discharge based on VA documentation. I acknowledge that any new loan cannot be discharged in the future based on present impairments unless my condition substantially deteriorates.

I am seeking a new Title IV federal student loan less than three years after official discharge of my prior loan(s), not based on VA documentation. I acknowledge that a new loan cannot be disbursed to me within this post-discharge monitoring period unless and until I have successfully petitioned the Disability Discharge Loan Servicing Center to restore my discharged loan(s) to active repayment status. I also acknowledge that any new loan cannot be discharged in the future based on present impairments unless my condition substantially deteriorates.

IMPORTANT: If you are seeking a new loan, this document must be accompanied by a signed, dated letter from a physician stating that your condition has improved since the previous loan was discharged and that you are now able to engage in "substantial gainful activity" such as working or attending school. If such a letter is already on file from a previous academic year, then only this New Aid After Loan Discharge Form needs to be submitted.

All of the information on this form is true and complete to the best of my knowledge. If requested, I agree to provide further documentation to substantiate the information provided.

Signature