

# LOAN DISCHARGE STATEMENT

---

Name \_\_\_\_\_ EMPLID \_\_\_\_\_

---

Email \_\_\_\_\_ Phone \_\_\_\_\_

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

The National Student Loan Data System (NSLDS) indicated that you have one or more federal students loans that have been either totally or conditionally discharged because of a total and permanent disability.

A total and permanent disability is a condition in which an individual is unable to work and earn money because of an injury or illness that is expected to continue indefinitely, or result in death.

## INSTRUCTIONS:

- Complete Section A if you wish to be considered for federal grants only.

OR

- Complete Section B if you wish to be considered for both federal student loans and grants.

## REQUIRED:

This form must be completed and submitted to the Office of Financial Aid. IF you complete Section B you must submit this form with a primary physician's certifying statement of student's ability to secure gainful employment prior to awarding any student financial aid.

---

### Section A

If you do not wish to be considered for federal student loans and prefer to be considered for federal grants only, you must sign and date the signature line in this section which indicates that you have read this statement and understand that you wish to be considered only for federal grants.

---

Student Signature (required)

---

Date

---

### Section B

Before you can be considered for additional federal student loans, you must confirm that you understand the following:

1. IF my Federal Student Loan(s) have been totally discharged due to a total and permanent disability, I understand that this new loan cannot later be cancelled based on any present condition unless that conditionally substantially deteriorates to the extent of the definition of a total and permanent disability, which is as defined above.
2. IF my Federal Student Loan(s) have been conditionally discharged due to a total and permanent disability and the conditional period hasn't elapsed, I understand that collection will resume on the conditionally discharged loan (which must begin before receipt of new loan) and that unless my condition substantially deteriorates to the extent that the definition of total and permanent disability, as defined above, is met again, the prior loan can't be discharged in the future.
3. I understand that I must complete Section B of the Loan Discharge Statement each time I am scheduled to receive a new loan.

Fax Number: (804) 371-3739  
Email: [finaid@reynolds.edu](mailto:finaid@reynolds.edu)

I have read the above information and am aware that my new Federal Student Loan(s) cannot later be cancelled on the basis of any present impairment unless that condition substantially deteriorates to the extent that the definition of total and permanent disability, as outlined by the Department of Education, is again met. I also understand that collection may resume on any loans that have been conditionally discharged.

---

Student Signature (required)

---

Date



Central Financial Aid Office Post  
Office Box 85622  
Richmond, VA 23285-5622