

**WARNING!! If you purposely give false or misleading information on this document, you may be fined, sentenced to jail, or both**

***Borrower Acknowledgement Form  
Must be Notarized***

Before signing below, carefully read the entire form. Please use dark ink.

**Borrower Acknowledgments: You must initial each paragraph, proving you have read and *fully* understand what you are signing.**

\_\_\_\_\_ I acknowledge that I previously received one or more Federal Student Loan(s), which were cancelled due to my total and permanent disability. I acknowledge that I **now (today)** have the ability to work and earn money. I have requested my physician to certify that my impairment(s) have improved sufficiently, so that I **now (today)** have the ability to engage in Substantial Gainful Activity.

\_\_\_\_\_ I acknowledge that I am now applying for one or more New Federal Loan(s). I understand that any New Federal Student Loan(s) I receive, now or in the future, cannot be cancelled due to any impairment(s) which are present at the time I apply for and receive the student loan(s) *unless*, the impairment(s) deteriorates so that I am once again determined to be totally and permanently disabled.

\_\_\_\_\_ I understand that total and permanent disability, for purposes of discharging a Federal Student Loan, is defined as the condition of an individual who is unable to work and earn money because of an injury or illness that is expected to continue indefinitely or result in death.

\_\_\_\_\_  
(BORROWER'S SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(BORROWER'S PRINTED NAME)

\_\_\_\_\_  
(BORROWER'S SOCIAL SECURITY NUMBER)

**Department of Education's Definition  
of Substantial Gainful Activity:**

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.

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the above-named individual \_\_\_\_\_ personally appeared before me and **FULLY** understands the document he/she is signing.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

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