OLIVET NAZARENE UNIVERSITY

2023-24 Discharged Loans C-Code Clearance Form
Office of Student Financial Services - One University Ave - Bourbonnais, IL 60914
Phone: (815) 939-5245 Fax: (815) 939-5074 Email: studentfinance@olivet.edu

ONU ID # or SSN_____ **Date of Birth**_____ **Phone**_____

Student Name_____
      Last   *First*   *M.I.*

Student Address_____
      Street (include apartment #)   *City*   *State*   *ZIP Code*

The National Student Loan Database System (NSLDS) has reported that you have received a Total and Permanent Disability (TPD) discharge for one or more federal student loans. This form serves to reestablish your eligibility for federal loan and/or TEACH grant programs when prior loans have been discharged due to TPD. Completion of this form does not guarantee that you will qualify for future federal student loans and/or TEACH grants.

Please return completed form and physician's certification (if applicable) by mail, fax, or upload through the Self-Service portal. See contact information above.

*** If you do not wish to receive any federal student loans and/or TEACH grant for the 2023-24 award year, please skip to section B.

A. If you wish to be considered for federal student loans and/or TEACH grant, please initial and sign the statements below:

_____ I have attached an original signed physician's certification on letterhead completed by a qualified physician stating that I am employable and able to repay any new loans borrowed. (Certification must include physician's contact information.)

_____ I have read and understand the Borrower Statement below and I understand that a new Borrower Statement must be submitted each time a new loan is borrowed.

BORROWER STATEMENT
By signing this form, I acknowledge that I have the ability to engage in substantial gainful activity and that any new federal student loans and/or TEACH grants I receive cannot be discharged on the basis of any present impairment unless the condition deteriorates and I am again totally and permanently disabled.

If a defaulted loan was discharged and then reaffirmed or was conditionally discharged and payment resumed on it, I understand that I must make satisfactory repayment arrangements before I receive a new loan and/or grant funds.

_____
Student Signature   **Date**

B. If you do <u>not</u> wish to be considered for federal student loans and/or TEACH grant, please read and sign below:

I am not interested in receiving new federal student loans and/or TEACH grant at Olivet Nazarene University for the 2023-24 award year. I understand that I will not be offered federal student loans or TEACH grant but will be offered any other state or federal grants for which I am eligible.

_____
Student Signature   **Date**

> **WARNING: If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both. If we have reason to believe that the information on this form is not accurate, we may require additional documentation.**