

## **2024-2025 Borrower Acknowledgement and Loan Reaffirmation Statement**

Instructions: Before signing below, carefully read the entire form. The completed form will need to be returned to the Baker College Financial Aid office at the address listed above, along with the Physician's Certification form (if not previously submitted).

### **Student Information**

Student Name: \_\_\_\_\_ UIN: \_\_\_\_\_

### **Details About this Form**

Because you received a total and permanent disability discharge on your previous loan(s), you currently are not eligible to receive additional Title IV Federal education loans. You may be eligible for other types of federal assistance, such as grants, or for other non-federal assistance. 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.

To receive a new Title IV loan, you must be capable of substantial gainful activity. This means you must be able to work and earn money. Your physician must certify that you are able to engage in substantial gainful activity.

If you are applying for a new Title IV loan within three years of the date you became totally and permanently disabled, you must reaffirm any loan(s) which were previously discharged due to the total and permanent disability, if those loan(s) were discharged on or after July 1, 2001. If any of your previous loan(s) were in default at the time the loan(s) was discharged due to total and permanent disability, you will also be required to reinstate Title IV eligibility on the defaulted loan(s) before you will be eligible to receive additional Title IV aid. To reinstate Title IV eligibility, you must make at least six reasonable and affordable, voluntary, on-time, consecutive monthly payments on the defaulted loan(s).

### **Borrower Acknowledgement**

I previously received one or more student loans or which I applied for cancellation due to my total and permanent disability. I acknowledge that I now have the ability to work and earn money. I have requested my physician to certify that my impairment(s) has improved sufficiently so that I now have the ability to engage in gainful activity.

I am now applying for one or more new Title IV loans. I understand that any new loans I receive, now or in the future, cannot be discharged due to any impairment(s) present at the time I apply for or receive the student loan(s), unless my physician certifies the impairment(s) has substantially deteriorated after I receive the new loan(s) to the point that I am once again totally and permanently disabled.

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By my signature below, I reaffirm and agree to repay any loans discharged due to total and permanent disability if the loan was discharged on or after July 1, 2001 and if I applied for a new loan within three years of the date I became totally and permanently disabled. I understand that I must repay the previously discharged loan(s) according to the terms and conditions of my promissory note(s). I also understand that I cannot have the loan(s) discharged again due to total and permanent disability unless my physician certifies that my impairment has significantly deteriorated (such that I am again totally and permanently disabled) after the date I signed this document.

I understand that any previous loan(s) not in default will be sold to the Department of Education and I will be required to repay the loan(s) to them or any loan servicer acting on their behalf.

I understand that any previous loan(s) which were in default will continue to be held by my guarantor or the Department of Education. I understand that I will be required to make satisfactory repayment arrangements, consisting of making at least six reasonable and affordable, voluntary, on-time consecutive monthly payments, on each defaulted loan before I can receive any new Title IV assistance.

I am requesting that Baker College offer me loans for the semesters that I will select below. I understand that I must still accept the loans via my financial aid portal.

\_\_\_\_\_ Summer 2024

\_\_\_\_\_ Fall 2024

\_\_\_\_\_ Spring 2025

\_\_\_\_\_ Summer 2025

### **Student Signature**

By signing this worksheet, I (we) certify that the information reported is complete and accurate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Physical Signature Required)