

REQUEST FOR REVIEW

NAME _____ SSN _____

CURRENT ADDRESS _____

If you object to reporting of the default status of your debt to credit reporting agencies or offset against your Federal and/or State tax refunds and other payments for the student loan or grant overpayment described in the Debt Statement, you can use this form to request a review or hearing. If you object **ONLY** because you believe you cannot afford to pay this debt, but you wish to arrange payment terms, **DO NOT USE THIS FORM. INSTEAD**, write or call the Contact listed on the Debt Statement.

I. Check **ONLY ONE** of the following:

I want a review of my objection based on this written statement and the records in my debt file. **COMPLETE PARTS II AND IV OF THIS FORM.**

I want an in-person hearing in the city shown on the Debt Statement to present my objection. I understand that I must pay my own expenses to appear for this hearing. **COMPLETE PARTS II, III, AND IV OF THIS FORM.**

I want a hearing by telephone. **COMPLETE PARTS II, III, AND IV OF THIS FORM.**

II. Check the objections that apply. **ENCLOSE** the documents described here (if you do not enclose documents, your objections will be reviewed based on the information on this form and the records in your debt file). Discharge application forms can be obtained at myeddebt.ed.gov/borrower or by calling 800-621-3115. Parent borrowers should answer 8 - 13 about the student:

1. I do not owe the full amount shown because I repaid some or all of this debt. **ENCLOSE** copies of front and back of checks, and copies of money orders and receipts for payments made on the debt.

2. I am making payments on this debt as required under the repayment agreement I reached with the holder of the debt. **ENCLOSE** copies of repayment agreement and front and back of payment checks.

3. I filed for bankruptcy and my case is still open. **ENCLOSE** copies of any court document showing name of court and case number.

4. This debt was discharged in bankruptcy. **ENCLOSE** copies of discharge order and the schedule of debts filed with the court.

5. I am totally and permanently disabled. **ENCLOSE** either a completed *Discharge Application: Total and Permanent Disability* OR a notice from the U. S. Department of Education's Total and Permanent Disability Servicer showing that they have received a discharge application. To complete a discharge application, visit www.disabilitydischarge.com.
6. This is not my Social Security Number, and I do not owe this debt. **ENCLOSE** copies of your Driver's License or other identification issued by a government agency and your Social Security Card.
7. I believe that this debt is not an enforceable debt in the amount stated for the reasons explained in the attached letter. **ENCLOSE** a letter explaining any reason for your objection to reporting of the default status of your debt to credit reporting agencies or collection of this debt by offset of your Federal and/or State tax refunds and other payments. Be as specific as possible. **INCLUDE** any records that support your reasons. If you object because you believe you cannot afford to pay this debt, but you wish to arrange payment terms, write or call the contact listed on the Debt Statement.
8. I enrolled in a school, but did not attend, withdrew, or was terminated from the school within a timeframe that entitled me to a refund of part or all of my loan proceeds, and I did not receive the benefit of a refund to which I was entitled, either from the school or from a third party. **ENCLOSE** a completed *Loan Discharge Application: Unpaid Refund*.
9. I was unable to complete my education because the school for which I borrowed this loan closed. **ENCLOSE** a completed *Loan Discharge Application: School Closure*.
10. I had no high school diploma or GED when I enrolled at the school for which I borrowed this loan, and the school improperly determined my ability to benefit from the training offered. **ENCLOSE** a completed *Loan Discharge Application: False Certification of Ability to Benefit*.
11. When I borrowed this loan, I had a condition (physical, mental, age, criminal record) that prevented me from meeting State requirements for performing the occupation for which the school trained me. **ENCLOSE** a completed *Loan Discharge Application: False Certification (Disqualifying Status)*.
12. I believe that the school without my permission signed my name on the loan application, promissory note, loan check or electronic funds transfer (EFT) authorization. **ENCLOSE** a completed *Loan Discharge Application: Unauthorized Signature/Unauthorized Payment*.
13. I believe that I have a defense to repayment of my debt (also known as a borrower defense) because _____ (school) engaged in acts or omissions that would give rise to a cause of action against the school under applicable State law and the cause of action directly relates to the loan or to the school's provision of educational services for which the loan was provided. I previously submitted a Borrower Defense to Repayment loan discharge application on or about _____. (If you did not previously submit an application, **ENCLOSE** one of the following completed applications: 1) Application for Borrower Defense to Loan Repayment; 2) Attestation for Certain Heald College Students; or 3) Attestation for Certain Everest and WyoTech Students).

14. I believe that I am the victim of identity theft. **ENCLOSE** a completed *Loan Discharge Application: False Certification (Identity Theft)*. Note: this is also known as "Certification/Agreement of Cooperation of Identity Theft Claims."

15. The borrower of this loan, or the student for whom this loan was borrowed or grant was issued, is deceased. **ENCLOSE** a certified copy of the death certificate.

III. IF YOU WANT AN IN-PERSON OR TELEPHONE HEARING, YOU MUST COMPLETE THE FOLLOWING:

The debt records and documents I submitted to support my statement in Part II do not show all the material (important) facts about my objection to collection of this debt. I need a hearing to explain the following important facts about this debt: (EXPLAIN below or on a separate sheet of paper the additional facts that you believe make a hearing necessary. If you have already fully described these facts in your response in Part II, WRITE HERE the number of the objection in which you described these facts _____.)

Note: If you do not receive an in-person or telephone hearing, your objection will be reviewed based on information and documents you supply with this form and on records in your debt file.

Phone number at which I can be reached during daytime hours: _____

Explanation of why an in-person or telephone hearing is necessary:

IV. I state under penalty of law that the statements I have made here are true and accurate to the best of my knowledge.

Date: _____ Signature: _____