

Conditional Discharge Loan Request 2023-2024

Student Financial Aid and Scholarships

This form must be completed by any student wishing to receive federal student aid during a Total and Permanent Disability, Conditional Discharge period. Student Financial Aid and Scholarships must review all loans and other pending information prior to awarding any federal financial aid .		
Studen	t Name	BGSU ID#
Contac	et Phone:	
Comp	olete, sign and date either option 1	or option 2 below:
	tion 1:	Federal Student Loans for your educational
expe		school year and would like your financial aid
	Student Signature	Date
If a be perme physi gainf	anent disability wishes to take out cian's certification that indicates ul activity. The borrow must also	ditionally discharged due to total and t another Federal Loan, they must obtain a they have the ability to engage in substantial sign the statement below.
	gainful activity.	ly physically recovered and are capable of attending school,
		nd securing employment in order to repay the new loan you are
2.	By signing below you are requesting Federal Loan funds. In addition, you are aware that if your prior loan was conditionally discharged, and the conditional period has not elapsed, you are affirming by signing below that collection will resume on the conditionally discharged loan. Furthermore, unless your condition substantially deteriorates, the prior loan cannot be discharged in the future for any impairment present when the conditional discharge was granted or when you requested the new loan.	
	*Your financial aid will not be processed without the physician's certification to support your request for new federal loans.	
	Student Signature	Date