

LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OM8 No. 1845-0058 Form Approved Exp. Oats 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION	
	Please enter or correct the following information:
	SSN (b)(6)
	Name
	Address (b)(6)
	City, State, Zip
	Telephone - Home (
	Telephone - Other ()
	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
	ons and other information on the following page. If the school that you believe impt to resolve this issue before applying for an unpaid refund loan discharge. If you are a parent borrower applying for a PLUS loan discharge, begin with Item 1.
Student's name (last, first, middle initial):	2. Student's SSN:
3a. School's name:	3b. School's address (street, city, state, zip):
Robert Fignonce	Dont Rembember
4. Is this school still open? ☐ Yes XNo ☐ Don't Know	5. If this school is closed, were you (or, for PLUS borrowers, was the student) attending the school when it closed? Yes No
6a. Do you have any other pending or approved application(s) for discharge of	of a loan you obtained to attend this school? Yes 🙀 No
6b. Has this school or any third party (see the definition of "third party" in Secreçuesting a discharge, or is such a refund or payment being considered.	tion 6, on the following page) made a refund or payment for any loan for which you are?
 If your answers to Items 6a and 6b are "No," skip to Section 3. If your ans for each discharge, refund or payment, if known. Use a separate sheet of 	wer to Item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7c paper if you need to report more than one discharge, refund or payment.
Ya. Reason for discharge, refund or payment;	•
7b. From whom did you request the discharge, refund or payment (include te	lephone number)?
7c. Amount you received or that you expect to receive: \$	
SECTION 3: REFUND INFORMATION	
If you have documentation from the school showing the amount of the shown in the documentation from the school is correct, skip to Section 4. If y	unpaid refund, attach a copy to this form. If you believe that the amount of the refund you don't believe that the amount is correct or if you don't have this documentation,
complete Items 8 through 13. If you are unable to provide any of the request	
B. What amount do you believe the school owes you?	Dont Know
9. Why do you believe the school owes you this amount?	Dont know
10. Your (or, for PLUS borrowers, the student's) first and last dates of attend-	ance at the school:
1_1_1-1_1-1_1 to 11-11	_ OR Never Attended Cant rembember
11. Your (or, for PLUS borrowers, the student's) program of study at the scho	
which the loan was intended. For example, if you received a loan for the that quarter only. However, if you received a loan for the winter and son	charges or the amount of the financial aid you received for the period of enrollment for e spring quarter only and you left school during the spring quarter, provide an amount for ing quarters, provide the total amount for both quarters. If the unpaid refund is for more wide the amounts requested in Item 12a or 12b for each period of enrollment separately,
12a. If your (or, for PLUS borrowers, the student's) last date of attendance venrollment for which the loan was Intended. Include tuition, fees, and to the processing of the process o	was before October 7, 2000, enter the amount of the school's charges for the period of other school charges.
12b. if your (or, for PLUS borrowers, the student's) last date of attendance veceived for any part of the period of annothment for which the loan was	was on or after October 7, 2000, enter the total amount of lederal grants and loans
	ms 6 through 12. Examples of documentation may include, but are not limited to, the it account statement, registration forms, withdrawal form, attendance records, and any and you believe the school ower you.
SECTION 4: BORROWER CERTIFICATION	
My signature below certifies that—	
	January 1, 1986. I received the loan funds directly, or they were applied as a credit to
 ! (cr, for PLUS borrowers, the student) did not attend the school or with 	hidrew or was terminated from the school within the timeframe that would entitle me to a in 2, Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am
 I have read and agree to the terms and conditions for loan discharge, 	as specified in Section 7 on the following page.
 Under penalty of perjury, all of the information I have provided on this my knowledge and bel (6)(6) 	application and in any accompanying documentation is true and accurate to the best of
Borrower's Signature:	Date: -7-1-11
	- Colt.
)	

Whomit may concern. I Really Cant Kemember anything about the school I was there boly top about 2 weeks then was ARESTERD and come to prison It was 1988 I'll never be able to ___pay any money becomes I've been IN prison most of my Life and I Never worked befor I'm going to apply For (Social Security) when I'm Release and do my addiction out patient programs and seek help ord stay out of trouble and out of prison and / File BankRupkey) because In broke so what everyou do to help me wit this Situation I ____Really appreciate it. Kespectfully yours. I really dight understand this loan Discharge Thing. Prease explain



LOAN DISCHARGE APPLICATION: UNPAID REFUND Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 04/30/2011

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties that may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

(b)(6)	
	Pleast (b)(6)
	SSN (b)(6)
	Name
	Address
	City, Slate, Zip Code (b)(6)
	Telephone – Home (b)(6)
	Telephone - Other ()
	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
lhāt you balieva owas you a refund is currently open, you should first cor	ructions, definitions, and terms and conditions in Sections 5, 6 and 7 on this form. If the school voltact the school to ettempt to resolve this issue before applying for an unpaid refund loan discharge. If you are a parent borrower applying for a PLUS loan discharge, begin with item 1.
i. Stocent Wane (East, Prist, M)	2. Student SSN:
3. School Name:	4. School Address (street, city, state, zip code):
1615 Robert Flace Beath S	ich-n1
5. Is this school still open? Yes No Don't Know	6. If this school is closed, were you (or, for parent PLUS borrowers, was the
510 B 10 B 101 B 1	student) attending the school when it closed? Yes No
	charge of a loan you obtained to attend this school?
 Has this school or any third party (see the definition of "third party you are requesting a discharge, or is such a refund or payment be 	y" in Section 6 on the following page) made a refund or payment for any loan for which
If your answers to Items 7 and 8 are "No," skip to Section 3. If you	ur answer to Item 7 or 8 is "Yes," provide the information requested in Items 9, 10, and 11
for each discharge, refund or payment, if known. Use a separate she 9. Reason for discharge, refund or payment:	eet of paper if you need to report more than one discharge, refund or payment.
10. From whom did you request or from whom did you receive the di	ischarge, refund or payment? Include telephone number.
11. Amount you received or that you expect to receive; \$	
SECTION 3: REFUND INFORMATION	
If you have documentation from the school showing the amount shown in the documentation from the school is correct, skip to Section complete Items 12 through 17. If you are unable to provide any of the 12. What amount do you believe the school owes you? \$	It of the unpaid refund, attach a copy to this form. If you believe that the amount of the refund tion 4. If you don't believe that the amount is correct or if you don't have this documentation, be requested information, write "Don't Know."
13. Why do you believe the school owes you this amount?	
Never completed completed first and last d	Se - Sixty-Africe years old and Sickly
	1 - 1 1 OR D Nover Attended 120 T Kamember
15. Your (or, for parent PLUS borrowers, the student's) program of stu	
for which the loan was intended. For example, if you received a loa for that quarter only. However, if you received a loan for the winter as	chool's charges or the amount of the financible aid you received for the period of enrollment than for the spring quarter only and you left school during the spring quarter, provide an amount and spring quarters, provide the total amount for both quarters. If the unpaid refund is for more t, provide the amounts requested in Item 16 or 17 for each period of enrollment separately, using
 If your (or, for parent PLUS borrowers, the student's) last date of period of enrollment for which the loan was intended. Include fulfill 	attendance was before October 7, 2000, enter the amount of the school's charges for the tion, fees, and other school charges. S
17. If your (or, for parent PLUS borrowers, the student's) last date of a received for any part of the period of enrollment for which the loar	attendance was on or after October 7, 2000, enter the total amount of federal grants and foans in was intended. \$ 150 + 500
Attach a copy of any documentation that supports your response school's catalog, refund policy, tuition bill(s), enrollment contract, stud correspondence from the school that contains information about the	ies to Items 12 through 17. Examples of documentation may include, but are not limited to, the dent account stalement, registration forms, withdrawal form, attendance records, and any a refund you believe the school owes you.
SECTION 4: BORROWER CERTIFICATION	
My signature below certifies that -	
 I received each loan for which I am requesting a discharge on or a my (or, for parent PLUS borrowers, the student's) school account to 	after January 1, 1986. I received the loan funds directly, or they were applied as a credit to
 I (or, for parent PLUS borrowers, the student) did not attend the sch refund of some or all of my loan funds. Except as explained in Section 	nool or withdraw or was terminated from the school within the time frame that would entitle me to a tion 2. Items 7 through 11, I have not received this refund, or any benefit of a refund to which I am
 I have read and agree to the terms and conditions for foan dischar 	rge, as specified in Section 7 on the following page
1000 one office in the lattice dies saidcheins for lattil didelia	The application and in any accompanying documentation is true and accurate to the best of
 Under penalty of perjury, all of the information t have provided on. 	application and the any accompanying documentation is true and accorde to the best of
 Under penalty of perjury, all of the information tinava provided on my knowledge and belief. 	s I / A of /
Under penalty of perjury, all of the information trave provided on my knowledge and belief. Borrower's Signature:	Today's Date: 01/28/11

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund issue before applying for this type of discharge.
- If you (or, for parent PLUS boπowers, the student) are currently attending the school, you are not eligible for this type of discharge. You should contact the school about the refund that you believe you are owed.
- If you, (or, for parent PLUS borrowers, the student) were enrolled when the school closed or withdrew from the school within 90 days before the school closed and you (or, for parent PLUS borrowers, the student) did not complete the program of study at another school, you may wish to apply for a closed school loan discharge rather than an unpaid refund discharge. If you are unsure about which type of toan discharge is most appropriate for you, contact your foan holder at the address shown in Section 9.

When completing this form, type or print using dark lok. Enter dates as month-day-year (mm-dd-yyyy). Use only numbers. Example: June 24, 2006 = 06-24-2006. If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form, Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9,

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Consolidation Loans (Direct Subsidized Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the Instructional program leading to a degree or certificate in which you (or, for parent PLUS borrowers, the student) were enrolled.
- The student (as in *or, for parent PLUS borrowers, the student*) refers to the student for whom a parent borrower obtained a Federal PLUS boar or Direct PLUS Loan.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a tuition recovery program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- I assign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form antiformany owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amount discharged by the Department on my loan(s).
- I understand that this request may be denied, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- I understand that if my loan is discharged based on any falso, fictilious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are §421 at seq. and §451 at seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1071 at seq. and 20 U.S.C. 1087a at seq.) and the authorities for collecting and using your Social Security Number (SSN) are §§428B(f) and 484(a)(4) of the HEA (20 U.S.C. 1078-2(f) and 1091(a)(4)) and 31 U.S.C. 7701(b). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your leaning, to determine your eligibility to receive a loan or a benefit on a loan (such as a deforment, forbearance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and report on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The Information in your file may be disclosed, on a case-by-case basis or under a computer matching program, to third parties as authorized under routine uses in the appropriate systems of records notices. The routine uses of this information include, but are not limited to, its disclosure to tederal, state, or local agencies, to private parties such as relatives, present and former employers, business and personal associates, to consumer reporting agencies, to financial and educational institutions, and to guaranty agencies in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing of collection of your loan(s), to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to focate you if you become delinquent in your loan payments or if you default. To provide default rate calculations, disclosures may be made to guaranty agencies, to financial and educational institutions, or to state agencies. To provide linancial aid history information, disclosures may be made to educational institutions. To assist program administrators with tracking refunds and cancellations, disclosures may be made to guaranty agencies. To provide a standardized method for educational institutions to efficiently submit student enrollment status, disclosures may be made to guaranty agencies or to financial and educational institutions, or to federal, state, or local agencies.

In the event of Rigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the Intigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may be made to our contractors for the purpose of performing any programmatic function that requires disclosure of records. Before making any such disclosure, we will require the contractor to maintain Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless à displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0059. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4537.

If you have questions regarding the status of your individual submission of this form, contact your lean holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

> U.S. Department of Education Federal Student Aid Loan Discharge Applications Processing Group Regional Office 50 Beale Streot, Room 8633 San Francisco, CA 94105-1813

If you need help completing this form, call:

1-800-621-3115

Page 2 of 2



May 24, 2011



DEBT ID (b)(6)

APPLICATION TYPE
UNPAID TUITION REFUND APP
UNPAID TUITION REFUND APP

REFUND AMOUNT: \$840.49

SCHOOL NAME ROBERT FIANCE HAIR DESIGN INST ROBERT FIANCE HAIR DESIGN INST

This letter acknowledges receipt of your completed application for student loan discharge.

The U.S. Department of Education has determined that you qualify for discharge, or partial discharge, of your student loan(s), listed above. As a result of this determination:

- You will be refunded all monies paid by you on the loan, which our records show to be the
 amount listed above. A check has been requested from the U.S. Treasury. Please allow 4-6
 weeks for delivery;
- you will be relieved of the obligation to repay the loan;
- if you were in default on the discharged loan, you will no longer be regarded as in default on the loan and the past reporting of a default will not preclude you from receiving assistance under the Title IV, Higher Education Act Programs in the future; and
- The Department will report the discharge to all credit reporting agencies to which it reports loan information so that the adverse credit history assigned to the loan is deleted.

This discharge covers only the loan(s) held by the U.S. Department of Education, listed above. The Department has made no determination regarding loans which may be held by guaranty agencies, servicers, lenders, or educational institutions. If you believe that you may be eligible for discharge of other loans, you should contact the holder of those loans. If you have further questions, please call 1(800)-621-3115.

Sincerely,
Operations Services Processing Group

FEDERAL STUDENT AID!!!!!!!!START HERE. GO FURTHER."

(b)(6)

From: Guidry, Winnie [Winnie.Guidry@ed.gov]

Sent:

Tuesday, May 17, 2011 3:44 PM

To:

(b)(6)

Subject: Pnotes



Thanks

(b)(t

US Department of Education
Winnie Guidry, Loan Analyst
Federal Student Aid/Operations Services Group
50 Beale St., 8609
San Francisco CA 94105
(415) 486-5649 - Phone
(415) 486-5672 - Fax
E-mail: winnie.guidry@ed.gov

BEST COPY AVAILABLE

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AUXILIARY LOAN TO ASSIST STUDENTS (ALAS) A MAPORTANT READ THIS INFORMATION CAREFULLY

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B. PROMISE TO PAY

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First Independent Trust Company

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E. MODIFICATION OF REPAYMENT TERMS.

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F. DEFAULTIN ACCELERATION .

F. DEFAULT-B. ACCELERATION:

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NOTICE TO BORROWER

IN OU HOT SIGN THIS PROMISSORY NOTE REFORE YOU READ IT INTO ARE ENTITIES TO A COPY OF THIS PROMISSORY NOTE IN: YOU MAY PREPAY THE UNPAID BALANCE AT ANY THAT WITHOUT PERALTY.

-i. If you have any questions or wish to carcel this loan 12 do not cash the loan checkes) and 3) contact your lender

7-8-87

18. Hy sh 6 12 mg

LENDER COPY

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Poor Source Original

DEFERMENT OF REPAYMENT

REST COPY AVAILABLE

Exponentiand that in certain instances authorized by the ACT the payments that I am required to make under Section B may be deferred. Payments of principal on my loan will be deserted attaining the payment period begins. Sections of circumstances listed below provided I comply with the procedural requirements set forth in the regulations governing the Augustan Loan to Assist Students (ALAS).

- The study of a seminor that is participating in the ALAS program. (However, only critises or nuclonals may
- attend achools outside of the USD.

 R. Full time study at an institution of higher education or a vocational school that is operated by an agency of the refederal Government (e. gittheservice ecademies) a reason the harmonic and the second second

graduate fellowship program approved by the Secretary of Education; or

Spin feltablitation training program for disabled individuals approved by the Secretary of Educations -

is Folippineds not exceeding 3 years for each of the following while I am --

Art (Art active thirty in the Armed Forces of the United States or serving as an officer in the Commissioned Corps of the United States Public Health Service:

B. Serving 45 a Peace Corps Volunteer:

- C Serving as a full-time volunteer under Title I of the Domestic Volunteer Service Act of 1973 (ACTION program (W.C. VISTA)
- D Serving as a fulfilling volunteer for an organization exempt from Federal income taxation under Section 50\$ (c) (3) of the Internal Revenue Code of 1954, while performing service which is comparable to service performed in the Peace Corps or ACTION programs; or
- E. Temporarily totally disabled, as established by an affidavit of a qualified physician, or unable to cecure amployment becaused ans providing care required by my spouse who is temporarily totally disabled, as estab-"lithed by an affidavit of a qualified physician.
- For a period not exceeding 2 years while I am serving in an internship that is required for me to gain profession recognition required to begin professional practice or service.
- d. For a single period not exceeding one year while I am conscientiously seeking but unable to find full-time *employment in the United States. *

To be granted a deferment, I must provide the lender with written evidence of my eligibility, I must subsequently notify the lender as soon as the condition for which the deferment was granted no longer exists.

REPAYMENT BY DEPARTMENT OF DEFENSE

Under certain circumstances, military personnel may have their loans repaid by the Secratary of Defense, in accordance with Section 902 of the Department of Defense Authorization Act, 1981 (P.E. 96-342, 10 U.S.C. 2141, note.)

Questions concerning the program should be addressed to the local Service recruiter. The program described is a recruiting program and does not pertain to prior service individuals or those not eligible for enlistment in the Armed Forces

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EDISCLOSURE OF LOAN INFORMATION

CGENERAL COMPANY

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THE PAYMENT

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iii. Do paid by me in instanceme, on the FESTA 2019 And 2019 Applicability to a social and be added to the principal amount of the loan (capitalized); not questionly, it accordance with leave and equitations governing the PLUS and I will contact the legister price to expiration of the period of determine to leave of repayment. If no place is do also I authorize the lender to establish repayment the plus delimps let form in Paragraph 2 of this Section, without my further and my lender russ throm me of the terms in writing at the leavest address which to the lender; and the last address which to the lender; and the leavest address which to the lender; and the last address which is the lender of the lender of

to the lender.

If a mover NO to #22, I agree to begin repaying to indicate within 60 days of disbusement.

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generally lasts at least 5 years but no more than 10 years. However, the lo to these rules apply: >

generally lasts at least 5 years but no more than 10 years. However, the follow to these rules apply:

a. The lendor may roquire a repayment period shorter than 5 years if this is ensure that chang each year of the repayment period I—or, if both my spot [SSLP PLUS or SLS program loses outstanding, we—pay toward principal least \$600 or the unpaid principal bilance of all such loses (plus intensit) which through the period described under Determined in this Note, grands "for bealmane", those periods will not be included in the 5- and 10-year losses are the periods.

The particular terms and conditions of repayment that apply to this louis will the loan disclosure statement that the lender will provide to ma. My obligation to repay this loan shall be cancelled if I die or become total nearly disabled.

E. PREPAYMENT ...

E. PREPAYMENT

At my option and without pertains I may propey at any time as or an principal business of this Note, in the event of prepayment, I will be effect uncarried stratest which I have paid. The amount of any such rebute the same matter than the same matter than the same matter.

F. DEFERMENT OF PAYMENT

Incertain instances authorized by the Act, the payments I am required to make Internal Estances acutorized by ser out the payments removating makes under Repayment in this Note may be deleted. The instances currently auth Act are described under Deferment in the HEAF application information bot such determent. Lagree to comply with the relevant lederal regulations and it Reputations of HEAF, including without lendation submission of required forms. I will remain responsible for payment of interest during any period of determinance in the process of the proce

G. FORBEARANCE

pel balance of this load,

If Earn smable to repay this four in accordance with the terms astablish in this Note, I may request the lender to modify these terms, funderstand the cation would be at the lenders option and would have to be in compliance deral reputations adopted under the Act and the Rules and Receipts MANG THAT IS PROGRAMED TO TREATHERS AS THIS PORTION IN THE PROGRAM TO THE PROGRAM TO THE PROGRAM TO THE PROGRAM THE PROGRAM THE PROGRAM TO THE PROGRAM THE PROGRAM

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H. DEFAULT

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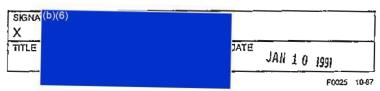
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AFFIX TO BACK OF PROMISSORY NOTE

Pay to the order of Higher Education Assistance Foundation ("HEAF") without recourse, provided, however, notwithstanding this Indorsement without recourse, the undersigned hereby expressly:

- 1. Warrants that:
 - a) no defense of any party is good against the undersigned; and
 - b) the undersigned is not in default under the terms of that certain Lender Agreement for Guarantee of Student toans with Federal Reinsurance ("Lender Agreement") between it and HEAF, in accordance with which payment of the indebtedness evidenced by this instrument was guaranteed by HEAF.
- 2. Disclaims the implied warranty that it has no knowledge of any insolvency proceeding instituted with respect to the maker of this instrument and instead warrants that to the extent it has knowledge of any such proceeding it has disclosed the same to HEAF, but no other implied warranties are hereby disclaimed.
- 3. Acknowledges that:
 - a) upon payment in full by HEAF of the claim submitted by the undersigned pursuant to the aforesaid Lender Agreement, HEAF will have discharged all of its obligations to the undersigned arising out of said Lender Agreement; and
 - b) notwithstanding payment by HEAF of the undersigned's claim and acceptance by HEAF of transfer of this instrument in consideration thereof, HEAF has not waived any rights that it may have against the undersigned pursuant to the tarms of the aforesaid Lender Agreement.





DISCHARGE APPLICATION TRACKING REFUND FORM

BORROWERS SSN:	(b)(6)		
DEBT ID			
BORROWERS NAME:			
IF JOINT REFUND:			
ADDRESS:			
NON-TOP REFUND:	:		7/ത്രമാ പ
TOP REFUNDS EFFECT	IVE YEAR/AMOUNT:	•	Processed on
			Pinessin
		- · · · · · · · · · · · · · · · · · · ·	1/2 7/1
TOTAL REFUND AMOU	NT: \$840.49		
REFUND REASON:			
REQUESTOR:	GUIDRY	DATE: 5/24/2011	
APPROVING OFFICIAL		DATE	

Close

Print



December 7, 2010





APPLICATION TYPE
UNPAID TUITION REFUND APP
UNPAID TUITION REFUND APP



SCHOOL NAME
ROBERT FIANCE HAIR DESIGN INST
ROBERT FIANCE HAIR DESIGN INST

This letter acknowledges receipt of your completed application for student loan discharge. The U.S. Department of Education has determined that you qualify for discharge, or partial discharge, of your student loan(s), listed above. As a result of this determination:

- You will be relieved of the obligation to repay the loan;
- if you were in default on the discharged loan, you will no longer be regarded as in default on the loan and the past reporting of a default will not preclude you from receiving assistance under the Title IV, Higher Education Act Programs in the future; and
- The Department will report the discharge to all credit reporting agencies to which it reports loan
 information so that the adverse credit history assigned to the loan is deleted.

This discharge covers only the loan(s) held by the U.S. Department of Education, listed above. However, if ED later locates documentation to support your attendance at the referenced school, the account will be restored to the system and you will be required to repay the debt.

The Department has made no determination regarding loans which may be held by guaranty agencies, servicers, lenders, or educational institutions. If you believe that you may be eligible for discharge of other loans, you should contact the holder of those loans. If you have further questions, please call 1(800)-621-3115.

Sincerely,
Operations Services Processing Group





LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loss Program / William D. Ford Federal Direct Loss Program

OMB No. 1845-0058 Forte Approved Exp. Data 04/30/2011

WARNING: Any person who knowingly makes a false abstanced or misrepresentation on this form or on any accompanying documents will be author to consilies which may include from processors or hole, under the U.S. Criminal Code and 20 U.S.C. 1097.

ECTION 1: BORROWER IDENTIFICATION	
	SSN (b)(6)
	-(b)(6)
	(b)(6)
	Address (b)(6)
	City, State, Zip Code (D)(C) Telephone – Home (D)(G)
	Telephone - Other
	E-mail (optional)
ECTION 2: SCHOOL AND LOAN INFORMATION	
a achievi Mad unci hallasia mane unci a mikatif is custatiffy code. Unit siscis	uctions, definitions, and terms and conditions in Sections 5, 6 and 7 on this form. If ad first contact the school to attempt to resolve this issue before applying for an unpetid charge, begin with Itam 3. If you are a parent borrower applying for a PLUS loan discharge,
(b)(6)	2. Student SSN (b)(6)
School Name:	4. School Address (street, city, state, zip code):
Robert France Hair Design	n Pont know
LOVELL LIANCE LIMI DENE	8. If this school is closed, were you (or, for parent PLUS borrowers, was the
is this school still open? Yes No On't Know	student) attending the school when it closed? Yes No
Do you have any other pending or approved application(a) for discharge	
Healthia acknowler any third party (see the definition of "third party" in S	Section 5 on the following page) made a refund or payment for any toen for which you are
requesting a discharge, or is such a retund or payment being consider	nd? ☐ Yes
your answers to items 7 and 8 are "No," skip to Section 3. If your a	makes to item 7 or 8 is "Yes," provide the information requested in Items 9, 10, and 11 for
ich diecharge, refund or payment, if known. Use a separate sheet of pa	sperif you need to report more than one discharge, refund or payment.
Reason for discharge, refund or payment	
2. From whom did you request or from whom did you receive the discha-	ingle, rarung or payment/ include assignment auritides.
ECTION 3: REFUND INFORMATION	
ECTION 3: REFUND INFORMATION You have documentation from the school showing the amount of a nown in the documentation from the school is correct, skip to Section 4.	If you don't believe that the emount is correct or if you don't have this documentation.
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ACCT NAM ED BALANC	12:	PROJ/ACT CA: (b)(6) CA BALANCE:	22,461.24
DATE	CODE	NARRATIVE	
11/29/10	ED5253	RECD EMAIL REPLY FROM WGUIDRY/REG9. MS. GUIDRY ASK FOR VERIFICATION OF BORR PHONE NO TO CONTAC ER DIRECTLY TO PROVIDE FURTHER EXPLANATION OF BAPPEAL REQUST FOR UNPO TUITION DENIAL. WILL FOL UP IN ANOTHER WEEK. CROBINSON	T H Orr
11/30/10	ED9222		
12/07/10	ED9222	UNP APPLICATION FOR DISCHARGE APPROVED SID 0075 DISCH APP APPROVED WITE NO REFUND DUE. BWR IS	
12/07/10 PF13-L101		15-L103 16-L104 17-L105 18-L106 19-L107 20-L108 2	
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DATE	CODE	NARRATIVE	
12/07/10	ED9222	LIGENT WITH STATEMENT THAT HER MOTHER PAID SCHO	OL /

12/07/10 ED9222

LIGENT WITH STATEMENT THAT HER MCTHER PAID SCHOOL \$1500.00 FOR HER TUITION; SHE ATTNOED SCHOOL FOR A FEW DAYS, THEN DECIDED SHE COULD NOT UNDERSTAND ENGLISH AND THERE WAS NO ONE TO TRANSLATE, SC SHE DROPPED OUT. SHE DID NOT GO TO THE FAO TO NOTIFY THEM AND SHE DID NOT GET THE MONEY THAT HER MOTHER PAID. WHEN I ASKED DID IT OCCUR TO HER THAT THE MONEY WAS REFUNDABLE? SHE ANSWERED NO. THERE WAS \$163.00 PAID TO THE LENDER AT SOME POINT AND NO OTHER PAYMENTS SHOW TO HAVE BEEN MADE TO GA OR TO ED. E-MAILED COPY OF LETTER TO C.ROBINSON. GUIDRY

12/07/10 ED9222

FIRST PAGE

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April 23, 2010





APPLICATION TYPE
UNPAID TUITION REFUND APP
UNPAID TUITION REFUND APP

SCHOOL NAME ROBERT FIANCE HAIR DESIGN INST ROBERT FIANCE HAIR DESIGN INST

This letter acknowledges receipt of your sworn statement requesting discharge of your student loan(s). After a thorough review of your application, the U.S. Department of Education (ED) has denied your request for discharge for the following reason(s):

You did not provide the dates that you attended the school. We are not able to determine that a tultion refund was owed without your statement indicating the dates that you attended the school, with any supporting documentation you may have.

This determination covers only the loan(s) held by the U.S. Department of Education, listed above. The Department has made no determination regarding loans held by guarantee agencies, servicers, lenders, or educational institutions. If you believe that you may be eligible for discharge of other loans, you should contact the holder of the loans.

You are responsible for paying any outstanding balance due on your loan(s). Please call 800-521-3115 to make arrangements for repayment of the loan(s).

Sincerely,

Operations Services Processing Division

FEDERAL STUDENT AID MEDISTART HERE. GO FURTHER."



US Department of Education
Federal Student Aid
Loan Discharge Application
Processing Group-Regional Office Room A633
50 Beale Street
San Francisco, CA 94105-1803

Re.: Loan Discharge

April 10, 2010

To Whom It May Concern:

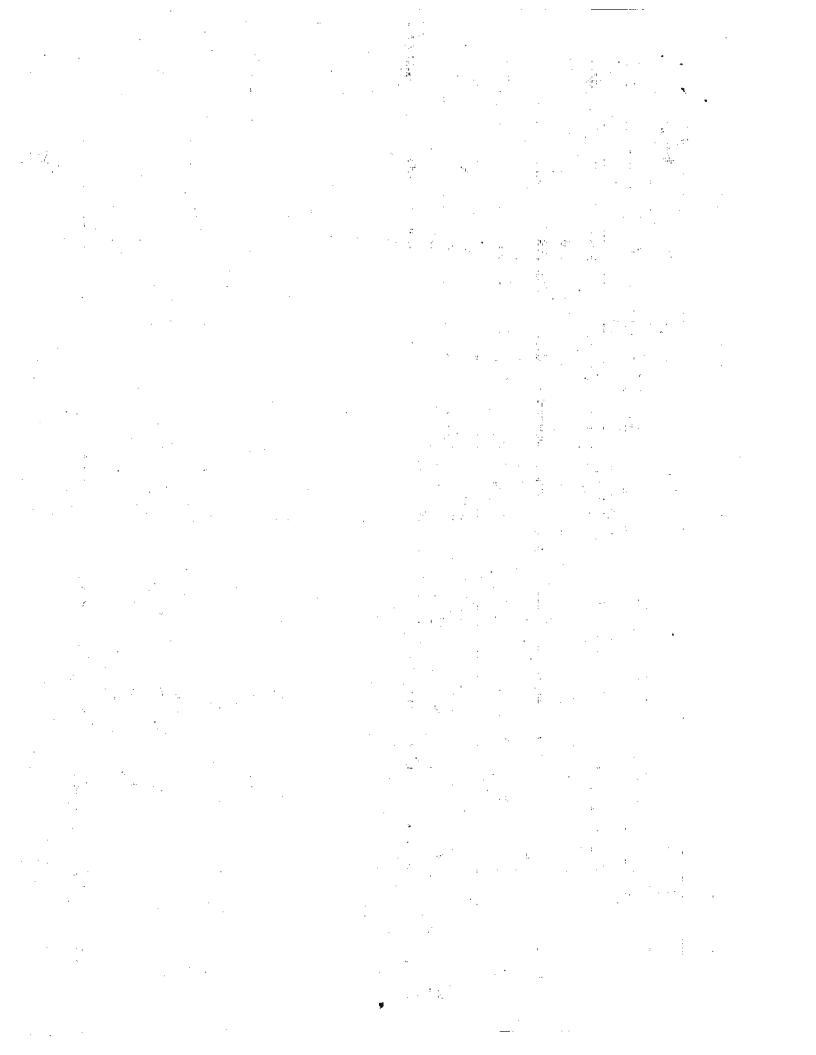
Please find enclosed a Loan Discharge Application: Unpaid Refund. Because the application does not give me the option I believe applies best to my situation, I feel obligated to write this explanation.

Over twenty years ago while exploring some career options; I came across a Cosmetologist School. I inquired within the school and met with a representative. At the time I did not speak English as I had been away in a foreign country for several years. My recollection of what went on is shady, but I do recall not being able to communicate well because they provided me with a Spanish-Speaking interpreter and I spoke Portuguese. I am certain I did not commit on attending that school, provided them with any legal form of documentation, nor pursued a career in Cosmetology. For clarification, I requested a copy of the "Promissory Note". Clearly the social security number is incorrect and no signature is present on the entire document, especially on the "Promissory Note" It seems as though they collected a signature on me somehow during that process, and used it to collect money on my behalf. I have been told that the alleged school was shut-down due to fraudulent charges.

I am a responsible citizen and abide by my financial obligations. I currently pay on student loans which I have committed for the completion of a Bachelor of Science degree from Central Washington University. I take these obligations very seriously, as well as my credit ratings. Please dismiss the debt in question from my records.

Thanks for your time and consideration in this matter.





SECTION & INSTRUCTIONS FOR COMPLETING THE FORM

Ballors you complete this application, you need to lotes the following:

- m if the achool is currently open, you should first contact the achool and eleveral to revolve the unpaid return issue before applying for this type of discharge.
- If you (or, for perset PLUS horrowers, the student) are currently attending the echool, you are not eligible for this type of clacharge. You about contact the school about the return that you believe you are made.
- If you (or, for permit PLUS borrowers, the student) were enrolled when the achool closed or withdraw from the school within 90 days before the school closed and you (or, for permit PLUS borrowers, the student) did not complete the program of study at another achool, you may wish to apply for a closed school loan discharge rather than an unpetd reduced discharge. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When companing this form, type or print using dark init. Enter dates as month-day-year (nam-dd-yyyy). Use only numbers. Exemple: June 24, 2006 = 06-24-2006. If you need make space to anknow any of the harrel, continue on approach attents of paper and attent them to this form. Indicate the number of the harrel, pour are answering and include your name and accurate y

Return the completed force and any attractments to the address shown in Section 5.

SECTION 6: DEFINITIONS

- B The Federal Family Education Loss (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Bupplemental Loans for Students (81.8), Federal PLUS Loans, and Federal Consolidation Loans.
- m The William D. Forei Pederal Direct Loans (Direct Loans), Federal Direct Unaubeidized Stations/Ford Loans (Direct Unaubeidized Loans), Federal Direct Unaubeidized Stations/Ford Loans (Direct Unaubeidized Loans), Federal Direct PLUS Loans), end Federal Direct Consolidation Loans (Direct Consolidation Loans).
- If Soon discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repey the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any emount that you have repeid that exceeds the remaining blasence of the loan after the clean holder previously reported the rither of the loan.
- at Program of attidy means the instructional program leading to a degree or certificate in which you (or, for parent PLUS borrowers, the studenty were envolted.
- m The student (as in for, for parent PLUS borrowers, the student") refers to the student for whom a parent horrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Third perty refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a fulfion recovery program or a holder of a performance bond.

SECTION T: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- It agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund descharge.
- E i assign and transfer to the Department any right to recovery on the amount discharged that I may have from the achool identified in Section 2 of this form and/or any owners, affiliates or assigns of the achool, and from any party that may pay claims for a refund because of the actions of the achool, up to the amount discharged by the Department on my loan(s).
- III Lundersland that this request may be decised, or my discharge may be revoked. If fall to cooperate, provide documentation, or meet any of the other terms of my agreement on first form.
- s. I understand that if my loan is discharged based on any laise, fictious, or faustriant statements that i involvingly made on this form or on any eccompanying documents, I may be subject to civil and criminal penalties under applicable ledens' law.

SECTION &: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (6 U.S.C. 652s) requires that the following action be provided to you:

The authorities for collecting the requisition from end about you are §421 at asq. and §451 at asq. of the Filipher Education Act of 1985, as amended (20 U.S.C., 1071 at seq. and 20 U.S.C., 1073 at eq. and 20 U.S.C., 1073 at eq. and 20 U.S.C., 1074 at eq. and 20 U.S.C., 1075 at eq. and 1091(444) and 31 U.S.C., 1075 at eq. and 1091(444) and 31 U.S.C., 1075 and 1091(444) and 31 U.S.C., 1075 and 1091(444) and 31 U.S.C., 1075 at eq. and 1091(445) at eq. and 1

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibity to receive a form or a benefit on a low (such as a deferment, forbearment, forbea

The information in your file may be disclosed, on a case-by-case basis or under a computer matching program, to third parties as authorized under routine uses of this information include, but are not limited to, its disclosure to federal, state, or local agencies, to private parties such as relatives, present and former employers, business and parential associates, to coleuter reporting agencies, to financial and educational institutions, and (orgumenty agencies in order to verify your identity, to determine your religibility to resiste at one or a baset on a lose, to permit the servicing or collection of your loser(s), to enforce the terms of the lose(s), to investigate possible traud and to verify compliance with tederal student financial aid program regulations, or is locate you if you become deterquent in your losen payments or it you default. To provide default rate calculations, disclosures may be made to guarantly agencies, to linencial and discollarable institutions, disclosures may be made to guarantly agencies, to intencial and educational institutions. To counsely our intensical and institutions or the provide return to efficiently submit adultations, disclosures may be made to guarantly agencies, to financial and student enrollment status, disclosures may be made to guarantly agencies, to financial and substitutions. To counsel you in repayment efforts, disclosures may be made to guarantly agencies, to financial and educations, or to federal or to financial and educational institutions. To counsel you in repayment efforts, disclosures may be made to guarantly agencies, to financial and educations, or to federal, state, or locate, et al.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, courset, party, or winters if the deploques is relevant, and histograms. If this information, where store or with other information, indicate a potential violation of law, we may send it to the appropriate authority for action. We may send information to mainters of Congress if you sait from to help you with teleral students all questions. In discussances involving employment completine, prevences, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a disclosure of records. Before making any such disclosure, we will require the contractor to maintain Privacy Act safeguards. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

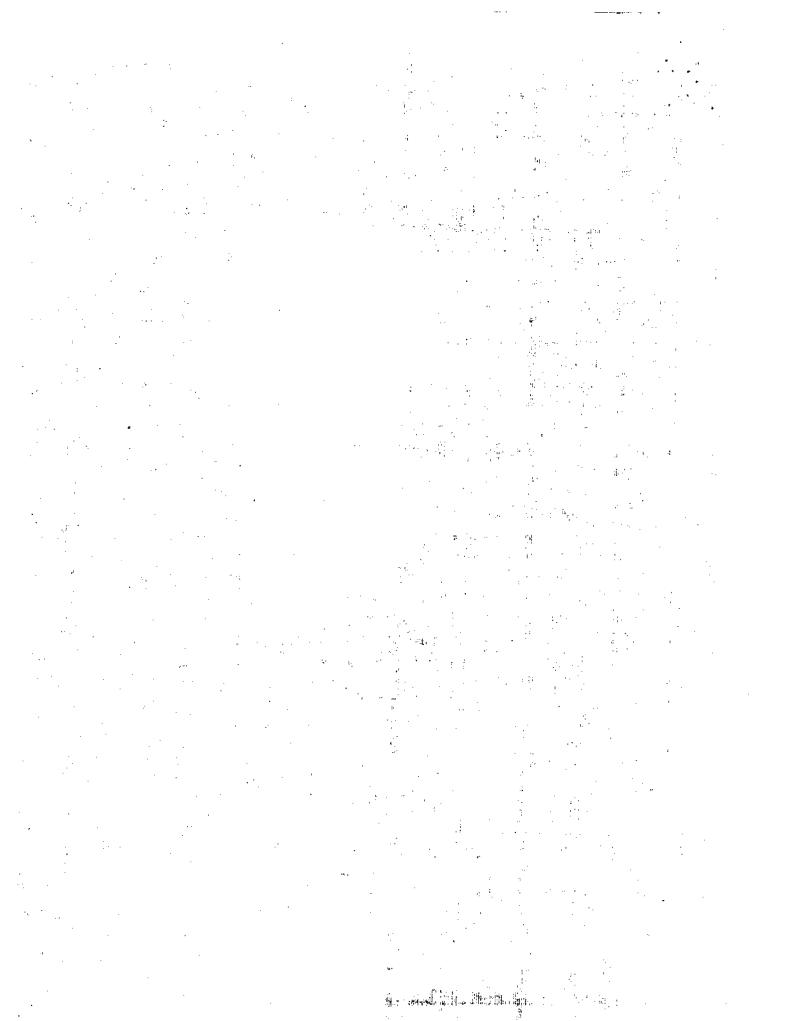
Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OARS control number. The valid OARS control number for this information collection is setnated to everage 0.5 hours (30 minutes) per seponse, including the time to review instructions, search assetting data resources, genter and materials the clear needed, and complete and review to information collection. If you have comments concerning the sociarscy of the time estimate(e) or suggestions for improving this form, please write to: U.S. Department of Education, Weshington, DC 20202-4537.

If you have quaetions regarding the status of your individual soluminators of this fores, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan decharge application and any attachments to: (If we address is aboun, return to your loan holder.)

If you need hale completion this form, call:





LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 04/30/2011

WARNING: Any person who knowingly makes a laise statement or misrepresentation on this form or on any accompanying documents will be subject to penalities that may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION	
<u> </u>	Please enter or correct the following information:
	7 (b)(6)
to the second se	Name -(b)(6)
	Address
A Section of the sect	(b)(6)
and the second s	Telephone - Home
•	Telephone - Other
	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
that you believe owns you a refund is currently open, you should first contail you are a student borrower applying for loan discharge, begin with Item	ctions, definitions, and terms and conditions in Sections 5, 6 and 7 on this form. If the school act the school to attempt to resolve this issue before applying for an unpaid refund loan discharge. 3. If you are a parent borrower applying for a PLUS loan discharge, begin with Item 1.
Student Name (Last, First, MI):	2. Student SSN: (b)(6)
3. School Name:	4. School Address (street, city, state, zip code):
ROBERT FIANCE	2435 SRAND CONCOURSE BRONX NEW YOU
5. Is this school still open? Yes DNo Don't Know	6. If this school is closed, were you (or, for parent PLUS borrowers, was the student) attending the school when it closed? Yes Yes Yes
 7. Do you have any other pending or approved application(s) for disched. 8. Has this school or any third party (see the definition of "third party" 	in Section 6 on the following page) made a refund or payment for any loan for which
you are requesting a discharge, or is such a refund or payment being	ng considered?
for each discharge, refund or payment, if known. Use a separate shee	answer to Item 7 or 8 is "Yes," provide the information requested in Items 9, 10, and 11 of paper if you need to report more than one discharge, refund or payment.
Reason for discharge, refund or payment:	
10. From whom did you request or from whom did you receive the disc	charge, refund or payment? Include telephone number.
11, Amount you received or that you expect to receive: \$	
SECTION 3: REFUND INFORMATION	
shown in the documentation from the school is correct, skip to Sectio complete liems 12 through 17. If you are unable to provide any of the	
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14. Your (or, for parent PLUS corrowers, the student's) first and last da	ESCUELA ERA INFRACASO Y ME SALI tes of attendance at the school:
15. Your (or, for parent PLUS borrowers, the student's) program of student's	- / 9 8 8 OR
	onl's charges or the amount of the financial ald you received for the period of enrollment
for which the loan was intended. For example, if you received a loar for that quarier only. However, if you received a loan for the winter and	In for the spring quarter only and you left school during the spring quarter, provide an amount of spring quarters, provide the total amount for both quarters. If the unpaid refund is for more provide the emounts requested in Item 16 or 17 for each period of enrollment separately, using
period of enrollment for which the loan was intended. Include tuitio	
received for any part of the period of enrollment for which the loan	
Attach a copy of any documentation that supports your responses school's catalog, refund policy, tuition bill(s), enrollment contract, stude correspondence from the school that contains information about the n	to Itema 12 through 17. Examples of documentation may include, but are not limited to, the ent account statement, registration forms, withdrawal form, attendance records, and any efund you believe the school owes you.
SECTION 4: BORROWER CERTIFICATION	
My signature below certifies that -	
my (or, for parent PLUS borrowers, the student's) school account to	
 I (or, for parent PLUS borrowers, the student) did not attend the scho- refund of some or all of my loan funds. Except as explained in Sectio entitled, from the school or any third party. 	ol or withdrew or was terminated from the school within the time frame that would entitle me to a n 2, Items 7 through 11, I have not received this refund, or any benefit of a refund to which I am
I have read and agree to the terms and conditions for loan discharge.	e, as specified in Section 7 on the following page.
 Under penalty of perjury, all of the informatios thave provided as it my knowledge and belieft (b)(6) 	is application and in any accompanying documentation is true and accurate to the best of
Borrower's Signature:	Today's Date: 8-10-20/0

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund issue before applying for this type of discharge.
- If you (or, for parent PLUS borrowers, the student) are currently attending the school, you are not eligible for this type of discharge. You should contact the school about the refund that you believe you are owed.
- If you, (or, for parent PLUS borrowers, the student) were enrolled when the school closed or withdraw from the school within 90 days before the school closed and you (or, for parent PLUS borrowers, the student) did not complete the program of study at another school, you may wish to apply for a closed school loan discharge rather than an unpaid refund discharge. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using dark ink. Enter dates as month-day-year (mm-dd-yyyy). Use only numbers. Example: June 24, 2006 × 06-24-2006. If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Station Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Consolidation Loans (Direct Consolidation Loans), and Federal Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for parent PEUS borrowers, the student) were enrolled.
- The student (as in "or, for parent PLUS borrowers, the student") refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a fullion recovery program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- Lassign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amount discharged by the Department on my loan(s).
- I understand that this request may be denied, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- understand that if my loan is discharged based on any latse, licitlious, or fraudularit statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable tederal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (S U.S.C. 552a) requires that the following notice be provided to you;

The authorities for collecting the requested information from and about you are \$421 et seq. and \$451 et seq. of the Higher Education Act of 1965, as arrended (20 U.S.C. 1071 et seq. and 20 U.S.C. 1087a et seq.) and the authorities for collecting and using your Social Security Number (SSN) are \$\$428B(f) and 484(a)(4) of the HEA (20 U.S.C. 1078-2(f) and 1091(a)(4)) and 31 U.S.C. 7701(b). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forteerance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect and report on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed, on a case-by-case basis or under a computer matching program, to third perties as authorized under routine uses in the appropriate systems of records notices. The routine uses of this information include, but are not limited to, its disclosure to federal, state, or local agencies, to private perties such as relatives, present and former employers, business and personal associates, to consumer reporting agencies, to financial and educational institutions, and to guaranty agencies in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you it you become delinquent in your loan payments or if you default. To provide default rate calculations, disclosures may be made to guaranty agencies, to financial and educational institutions, or to state agencies. To provide financial aid history information, disclosures may be made to guaranty agencies or to financial and educational institutions, or to federal or state agencies. To provide a standardized method for educational institutions to efficiently submit student enrollment status, disclosures may be made to guaranty agencies or to financial and educational institutions, or to federal, state, or local agencies.

In the event of Irigation, we may send records to the Department of Justice, a court, adjudicative body, coursel, party, or wroness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may be made to our contractors for the purpose of performing any programmatic function that requires disclosure of records. Before making any such disclosure, we will require the contractor to maintain Privacy Act safeguards. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Raduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid CMB control number. The valid DMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4537.

If you have questions regarding the status of your individual submission of this form, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (if no address is shown, return to your loan holder.)

U.S. Department of Education Federal Student Aid Loan Discharge Applications Processing Group Regional Office 50 Beale Street, Room 8633 San Francisco, CA 94105-1813 If you need help completing this form, call:

1-800-621-3115

Page 2 of 2

14:00:44 Monday, December 13, 2010 ; _ ^

(L117)

CLOSED SCHOOL TRACKING SCREEN ED9288 REGION: 09 ACCT OWNER: ED039

12/13/10 16:00:37

ACCT NO: (b)(6)

SID: 007515

FORM TYPE: 3 SEQ NO: 01 FORM 1 OF 1

PACKAGE ACTIVITY:

PC : 12/13/10 FA : 12/13/10

Company of the second of the s

Asset 1

DEBT TRACKING: ACT STATUS

DEBT ID

LOAN TYPE SLS

DISB AMT DISB DTE ID

LENDER

APPROVED
APPROVED

STAF

\$4,000.00 01/11/88 826626 KS620 \$1,313.00 01/08/88 826626 KS620

PROCESS PACKAGE Y/N: Y TOTAL REFUND AMOUNT: \$10,269.44 PAGE 1 OF 1 REQUEST HAS BEEN PROCESSED PF03-EXIT 13-L101 14-L102 15-L106 16-L109 17-R103 18-R109 19-F180



LOAN DISCHARGE APPLICATION: UNPAID REFUND Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION	
	Please enter of correct the following information:
	SSN (b)(6)
	Name 7 (b)(6)
	Address
007515	City, State, (b)(6)
00 (30)	Talephone - Home
	Telephone - Other (
	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
owes you a refund is currently open, you should first contact the school to atte are a student borrower applying for loan discharge, begin with Item Sa. If you	ons and other information on the following page. If the school that you believe mpt to resolve this issue before applying for an unpeid refund loan discharge. If you are a parent borrower publisher to a 20 US loan discharge, begin with Item 1.
4 Shidaffa anno flort fiest middle helden. (b)(6)	2. Student's SSN: (b)(6)
	3b. School's address (street, city, state, zip):
Deboot Finner	Inch I was stored dy, state, 2017 - Ham Rd
4. Is this school still open? Yes Dut Don't Know	5. If this school is closed, were you'(or, for PLUS borrowers, was the student) attending the school when it closed? Yes No
6a. Do you have any other pending or approved application(s) for discharge of	
	ion 6, on the following page) made a refund or payment for any loan for which you are
 If your answers to Items 6a and 6b are "No." skip to Section 3. If your answ for each discharge, refund or payment, if known. Use a separate sheet of p 	ver to Item 6a or 6b is "Yes," provide the information requested in Itoms 7a, 7b, and 7c paper if you need to report more than one discharge, refund or payment.
7a. Reason for discharge, refund or payment:	
7b. From whom did you request the discharge, refund or payment (include tele	phone number;?
7c. Amount you received or that you expect to receive: \$ 5 % 6	C-1 Cod Doc
SECTION 3: REFUND INFORMATION	TEM ME THE METERS
	npaid refund, attach a copy to this form. If you balleve that the amount of the refund
	u don't believe that the amount is correct or if you don't have this documentation,
8. What amount do you believe the school owes you? \$	
9. Why do you believe the school owes you this amount? I NEUL	
10. Your (or, for PLUS borrowers, the student's) first and last/dates of attendar	ice at the school: OR Never Attended
11. Your (or, for FLUS borrowers, the student's) program of study at the school	 -
	harges or the amount of the financial aid you received for the period of enrollment for
which the loan was intended. For example, if you received a loan for the silbat quarier only. However, if you received a loan for the winter and spring than one loan and the loans were for different periods of enrollment, providing the control of	pring quarter only and you left school during the spring quarter, provide an arrount for quarters, provide the total amount for both quarters. If the unpaid refund is for more be the amounts requested in Item 12a or 12b for each period of enrollment separately,
using a separate sheet of paper for your additional response(s). 12a. If your (or, for PLUS borrowers, the student's) last date of attendance was	s before October 7, 2000, enter the amount of the school's charges for the period of
enrollment for which the loan was intended. Include tuition, fees, and oth 12b. If your (or, for PLUS borrowers, the student's) last date of attendance was	s on or after October 7, 2000, enter the total amount of federal grants and loans
received for any part of the period of enrollment for which the loan was in	tended. \$
school's catalog, refund policy, tuition bill(s), enrollment contract, student a correspondence from the school that contains information about the refund	account statement, registration forms, withdrawal form, attendance records, and any
SECTION 4: BORROWER CERTIFICATION	
My signature below certifies that— I received each loan for which I am requesting a discharge on or after Janny (or, for PLUS borrowers, the student's) school account to pay the amount of the pay the pa	nuary 1, 1985. I received the loan funds directly, or they were applied as a credit to
 I (or, for PLUS borrowers, the student) did not attend the school or withdometrund of some or all of my loan funds. Except as explained in Section 2. 	ew or was terminated from the school within the timetrame that would entitle me to a Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am
 entitled, from the school or any third party. I have read and agree to the terms and conditions for loan discharge, as 	
	olication and in any accompanying documentation is true and accurate to the best of
Borrower's Signature:	Date: 4 / / C &
	; [' ' /

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund issue before applying for this type of discharge.
- If you (or, for PLUS borrowers, the student) are currently attending the school, you are not eligible for this type of discharge. You should contact the school about the refund that you believe you are owed.
- If you (or, for PLUS borrowers, the student) were enrolled when the school closed or withdrew from the school within 90 days before the school closed and you (or, for PLUS borrowers, the student) did not complete the program of study at another school, you may wish to apply for a closed school loan discharge rather than an unpaid refund discharge. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYYY (for example, "July 01, 2005" = "07-01-2005"). If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) were enrolled.
- The student (as in for, for PLUS borrowers, the student*) refers to the student for whom a parent borrower obtained a Federal PLUS Loan.
- Third party refers to any entity that may provide reimbursament for a refund owed by the school, such as a State or other entity offering a tuition recovery program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpeld refund discharge.
- I assign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- I understand that this request may be denied, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- I understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are §428(b)(2)(A) of seq. and §451 of seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) of seq. and 20 U.S.C. 1087s of seq.) and the authority for collecting and using your Social Security Number (SSN) is §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forbearance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of racords. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administrance our ioan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educations, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repsyment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of fitigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the fitigation. If this Information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for Improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651.

If you have questions regarding the status of your individual aubmission of this form, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

If you need help completing this form, call:



LOAN DISCHARGE APPLICATION SCHOOL CLOSURE CAND

OMB No. 1845-0015 Form Approved Exp. Date 08/31/2008

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program / Federal Perkins Loan Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines. Imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

penalties which may include fines, Imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.
SECTION 1: BORROWER IDENTIFICATION Please aples or correct the following information
(b)(6)
SSN (b)(6)
Name Address
Address City, State, Zip
Telephone Home (b)(6)
Telephono - Other (
E-mail (optional)
SECTION 2: STUDENT INFORMATION
Before completing this section, carefully read the entire form, including the instructions, definitions, and terms and conditions in Sections 4, 5, and 6 on this form. If you are a student borrower applying for loan discharge, begin with item 3. If you are a parent borrower applying for a PLUS loan discharge, begin with item 1.
1. Student's name (last, first, middle initial):
2. Student's SSN: - -
4.00
4. Date school closed (if known): 021-1-1-1988 5. Closed school's address (street, city, state, zip): Grand CovCourse Trondam Poad Bronk, 44-M
- 1/2011 1 10/03/171-10/19 11 1 1/10/18181
of ballos of discontinuous and of the same
7. Name of the program of study that you (or, for PLUS borrowers, the student) were enrolled in at the time the school closed:
If No. check all reasons that apply:
v☑ The school closed while you (or, for PLUS borrowers, the student) were still enrolled.
You (er, for PLUS borrowers, the student) withdrew from the school on:
You (or, for PEUS borrowers, the student) were on an approved leave of absence when the school closed:
From - -
To other (please explain): I was never told Sapol ups closing down because of Bantrupcy
9. Did you (or, for PLUS borrowers, the student) complete or are you in the process of completing the program of study or a comparable program of study at another school? Yes No If Yes, complete Item a) and b) below:
a) Did the other school give you (or, for PLUS borrowers, the student) credit for training received at the closed school by allowing transfer of credits or hours earned at the closed school, or by any other means? Yes Yes
b) Were you (or, for PLUS borrowers, the student) required to start the program of study over from the beginning at the other school? [] Yes (1) Yes
10. Did the holder of your foan receive any money back (a refund) from the school on your behalf? ☐ Yes ☐ No ☐ Don't Know If Yes, give the amount and explain why the money was refunded: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
11. Did you (or, for PLUS borrowers, the student) make any mopelary claim with, or receive any payment from, the school or any third party (see definition in Section 5) in connection with enrollment or attendance at the school? Yes Don't Know If Yes, please provide the following information:
(a) Name/address/tejcphone number of the party-with which the claim was made or from whom payment was received: Same address as a law (DECSONS) WAS AS THEE COLLAND TO STREET OF LOW MATTER AS COLLAND TO STREET OF LAY MOT
(b) Amount/status of claims /Ad, "Rivery Two weeks (c) Amount of payment received: 5 / 20 000
I received two flagments. Then Stice una surrectives received they
SECTION 3: BORROWER CERTIFICATION V
My signature below certifies that thave read and agree to the terms and conditions that apply to this loan discharge, as specified in Section 6 on the following page. Under penalty of perjury, I certify that all of the information I have provided on this form and in any accompanying documentation is true and accurate to the best of my knowledge and belief. (b)(6)
Borrower's Signature: Date: 2-14-08

SECTION 4: INSTRUCTIONS FOR COMPLETING THE APPLICATION

Type or print using dark link. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "January 31, 2006" = "01-31-2006"). If you need more space to answer any of the items, continue on separate sheets of paper and attach them to this form. Indicate the number of the item(s) you are answeing and include your name and social security number (SSN) on all attached pages:

Sign and date the form. Then, send the completed form and any attachments to the address in Section 8.

SECTION 5: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SES), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program Includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stalford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct
- x The Federal Perkins Loan (Perkins Loan) Program includes Federal Perkins Loans and Netional Direct Student Loans (NDSL).
- The date a school closed is the date that the school stopped providing educational instruction in all programs, as determined by the U.S. Department of
- The holder of a borrower's FFEL Program loan(s) may be a lender, a guaranty agency, or the Department. The holder of a borrower's Direct Loan Program loan(s) is the Department. The holder of a borrower's Perkins Loan Program Ioan(s) may be the Department or a school.
- Loan discharge due to school closure cancels the obligation of a borrower (and endorser, if applicable) to repay the remaining balance on a FFEL Program. Direct Loan Program, or Perkins Loan Program loan, and qualifies the borrower for reimbursoment of any amounts paid voluntarily or through forced collection on the loan. For consolidation loans, only the amount of the underlying loans (the loans that were consolidated) that were used to pay for the program of study listed in Item 7 will be considered for discharge. The loan holder reports the discharge to all credit reporting agencies to which the helder proviously reported the status of the lean.
- The student refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Dates of attendance: The "to" date means the last date that you (or, for PLUS borrowers, the student) actually attended the closed school,
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) were enrolled.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a tuition recovery program or performance bond.

SECTION 6: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON SCHOOL CLOSURE

- I received FFEL Program, Direct Loan Program, or Perkins Loan Program loan funds on or after January 1, 1986, to attend (or, if I am a PLUS borrower, for the student to attend) the school identified as "closed school" in Section 2 of this form. Those funds were either received by me directly, or applied as a credit to the amount owed to the school. I (or, if I am a PLUS borrower, the student) was enrolled at that school or on an approved leave of absence on the date that it closed, or withdraw from the school not more than 90 days before it closed (or longer if authorized by the Department). Due to the school's closure, I (or, if I am a PLUS borrower, the student) did not complete the program of study at that school. I (or, if I am a PLUS borrower, the student) did not complete and am not in the process of completing that program of study or a comparable program at another school by transferring credits or hours earned at the closed school to another school, or by any other means by which I (or, if I am a PLUS borrower, the student) benefited from the training provided by the closed school.
- Will provide, upon request, tostimony, a sworn statement, or other documentation reasonably available to me that demonstrates to the satisfaction of the Department or its designee that I meet the qualifications for loan discharge based on school closure, or that supports any representation that I made on this form or on any accompanying documents.
- I agree to cooperate with the Department or its designee regarding any enforcement actions related to my request for foan discharge.

 I understand that my request for foan discharge may be dented, or my discharge may be revoked if I fail to provide testimony, a swom statement, or documentation upon request, or if I provide testimony, a swom statement, or documentation that does not support the material representations I have made, or if I (or, if I am a PLUS borrower, the student) completed or am in the process of completing the program of study or a comparable program at another school through transfer of credits or hours from the closed school or by any other means by which I (or, if I am a PLUS borrower, the student) benefited from the training provided by the closed school.
- in Lituritier understand that if my loan(s) are discharged based on any false, fictilious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal ponalties under applicable federal law.
- Thereby assign and transfer to the Department any right to a refund on the discharged loan(s) that I may have from the school identified in Section 2 of this form and/or any owners, atfiliates, or assigns of the school, and from any third party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).

SECTION 7: IMPORTANT NOTICES

Privacy Act Disclosure Notice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:
The authorities for collecting the requested information from and about you are \$428(b)(2)(A) et seq., \$451 et seq. and \$461 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) et seq., 20 U.S.C. 1087a et seq., and 20 U.S.C. 1087a et seq.) and the authority for collecting and using your Social Security Number (SSN) is \$484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program, the William D. Ford Federal Direct Loan (Direct Loan) Program, or the Federal Perkins Loan (Perkins Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a lean or a benefit on a lean (such as a deferment, forbearance, discharge, or forgiveness) under the FFEL, Officel Loan, and/or Perkins Loan Programs, to permit the servicing of your lean(s), and, if it becomes necessary, to locally you and to collect on your lean(s) if your lean(s) become definquent or in default. We also use your SSH as an account identifier and to pennit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to information include its discretive to tederal, state, or local agencies, to congressed agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may sand information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0015. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this application, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have questions regarding the status of your individual submission of this application, contact your lean holder (see Section 8).

SECTION 8: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

If you need help completing this form, call:



LOAN DISCHARGE APPLICATION: SCHOOL CLOSURE

OMB No. 1845-0015 Form Approved Exp. Date 08/31/2008

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program / Federal Perkins Loan Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both under the U.S. Criminal Code and 20 U.S. C. 1997.

penalties which may include fines, imprisonment or bot SECTION 1: BORROWER IDENTIFICATION	th, under the U.S. Criminal Code and 20 U.S.C. 1097.
(b)(6)	Please enter or correct the following information.
(-)(-)	SSM (b)(6)
	Name = (b)(6)
	Address (b)(6)
	Gity, State, Zip
	Telaphone - Home (b)(6)
202515	Telephone - Other
SECTION 2: STUDENT INFORMATION	E-mail (optional)
Billion completing this section, carefully read the entire form, inclu	rding the Instructions, definitions, and terms and conditions in Sections 4.5, and 6 on this
form. If you are a student borrower apply (b)(6)	rding the Instructions, definitions, and terms and conditions in Sections 4, 5, and 6 on this and borrower applying for a PLUS loan discharge, begin with
uem 1.	
1. Student's name (last, Erst, middle initial):	
2. Student's SSN:	
3. Closed school's name:	
4. Date school closed (if known):	8161
5. Closed school's address (street, city, state, zip): 2435 (Grand Concourse Bronx, New York 10456
6. Dates of attendance at the closed school: From	1-198901-1-1-190
7. Name of the program of study that you (or, for PLUS borrowers, the s	student) were enrolled in at the time the school closed: Hobert France Hour
 Did you (or, for PLUS borrowers, the student) complete the program of If No, check all reasons that apply: 	of study at the closed school? [] Yes [] You Design In Structe
The school closed while you (or, for PLUS borrowers, the studen	
You (or, for PLUS borrowers, the student) withdrew from the selve	901 on:]
☐ You (or, for PLUS borrowers, the student) were on an approved I	leave of absence when the school closed:
FromTo	. - <u> </u> - -
Other (please explain):	
9. Did you (or, for PLUS borrowers, the student) complete or are you in \(\sum \text{ Yes} \) \(\sum \text{ Yes}, \) complete (text a) and b) below:	the process of completing the program of study or a comparable program of study at another school?
a) Did the other school give you (or, for PLUS betweens, the stude the closed school, or by any other means? \square Yes \boxtimes No	Sent) credit for training received at the closed school by allowing transfer of credits or hours carned at
	it the program of study over from the beginning at the other school? Yes
 Did the holder of your loan receive any money back (a refund) from If Yes, give the amount and explain why the money was refunded: 	the school on your behalf? Yes No Don't Know
11. Did you (or, for PLUS borrowers, the student) make any monetary of connection with enrollment or attendance at the school? [] Yes []	claim with, or receive any payment from, the school or any third party (see definition in Section 5) in If Yes, please provide the following information:
(a) Name/address/lelephone number of the party with whom the cla	im was made or from whom payment was received:
(b) AmounVstatus of claim:	(c) Amount of payment received: \$ (Write "none" if no payment was received.)
PEOTIONS, DODGOWED OF DESCRIPTION	
SECTION 3: BORROWER CERTIFICATION	
	I conditions that apply to this loan discharge, as specified in Section 6 on the following page, ed on this form and in any accompanying documentation is true and accurate to the best of
Borrower's Signature:	Date: 4/16/2008
	///

SECTION 4: INSTRUCTIONS FOR COMPLETING THE APPLICATION

Type or print using dark ick. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "January 31, 2006" = "01-37-2006"), you need more space to answer any of the items, continue on separate sheets of paper and attach them to this form. Indicate the number of the item(s) you are answering and include your name and social security number (SSN) on all attached pages.

Sign and date the form. Then, send the completed form and any attachments to the address in Section 8.

SECTION 5: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- Title William D. Ford Federal Direct Loan (Direct Loan) Program Includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- * The Federal Perkins Loan (Perkins Loan) Program includes Egderal Perkins Loans and National Direct Student Loans (NDSL).
- The date a school closed is the date that the school slopped providing educational instruction in all programs, as determined by the U.S. Department of Education (the Department).
- The holder of a borrower's FFEL Program loan(s) may be a tender, a guaranty agency, or the Department. The holder of a borrower's Direct Loan Program loan(s) is the Department or a school.
- Loan discharge due to school closure cancels the obligation of a borrower (and endorser, if applicable) to repay the remaining balance on a FFEL Program, Direct Loan Program, or Perkins Loan Program foan, and qualifies the borrower for reimbursement of any amounts paid voluntarily or through forced collection on the loan. For consolidation loans, only the amount of the underlying loans (the loans that were consolidated) that were used to pay for the program of study listed in Item 7 will be considered for discharge. The foan holder reports the discharge to all credit reporting agencies to which like holder previously reported the status of the loan.
- * The student refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan,
- Dates of attendance: The *to* date means the last date that you (or, for PLUS borrowers, the student) actually attended the closed school.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) were enrolled
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a tuition recovery program or performance bend

SECTION 6: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON SCHOOL CLOSURE

- I received FFEL Program, Direct Loan Program, or Perkins Loan Program loan funds on or after January 1, 1986, to attend (or, if I am a PLUS borrower, for the student to attend) the school identified as "closed school" in Section 2 of this form. Those funds were either received by me directly, or applied as a credit to the amount owed to the school. I (or, if I am a PLUS borrower, the student) was enrolled at that school or on an approved feave of absence on the date that it closed, or withdraw from the school not more than 90 days before it closed (or longer if authorized by the Department). Due to the school's closure, I (or, if I am a PLUS borrower, the student) did not complete the program of study at that school. I (or, if I am a PLUS borrower, the student) did not complete and am not in the process of complating that program of study or a comparable program at another school by transferring credits or hours earned at the closed school to another school, or by any other means by which I (or, if I am a PLUS borrower, the student) benefited from the training provided by the closed school.
- school, or by any other means by which I (or, if I am a PLUS borrower, the student) benefited from the training provided by the closed school,

 | Will provide, upon request, testimony, a sworn statement, or other documentation reasonably available to me that demonstrates to the satisfaction of the
 | Department or its designee that timest the qualifications for loan discharge based on school closure, or that supports any representation that I made on this form
 | or on any accompanying documents.
- Lagree to cooperate with the Department or its designee regarding any enforcement actions related to my request for loan discharge.
- Lunderstand that my request for loan discharge may be defined, or my discharge may be revoked if I fail to provide testimony, a swom statement, or
- documentation upon request, or if if provide lestimony, a sworn statement, or documentation that does not support the material representations I have made, or if I (or, if I am a PLUS borrower, the student) completed or am in the process of completing the program of study or a comparable program at another school through transfer of credits or hours from the closed school or by any other means by which I (or, if I am a PLUS borrower, the student) benefited from the training provided by the closed school.
- I further understand that if my loan(s) are discharged based on any false, fictilious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable federal law.
- I hereby assign and transfer to the Department any right to a refund on the discharged loan(s) that I may have from the school identified in Section 2 of this form and/or any owners, affiliates, or assigns of the school, and from any third party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).

SECTION 7: IMPORTANT NOTICES

Privacy Act Disclasure Notice: The Privacy Act of 1974 (6 U.S.C. 552a) requires that the following notice be provided to you:
The authorities for collecting the requested information from and about you are §428(b)(2)(A) et seq., §451 et seq. and §461 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1076(b)(2)(A) et seq., 20 U.S.C. 1087a et seq., and 20 U.S.C. 1067aa et seq.) and the authority for collecting and using your Social Security Number (SSN) is §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Lean (FFEL) Program, the William D. Ford Federal Direct Lean (Direct Lean) Program, or the Federal Perkins Lean (Perkins Lean) Program and giving us your SSN are voluntary, but you must provide the requested information, Including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a toan or a benefit on a loan (such as a determent, forbearance, discharge, or torgiveness) under the FFEL, Direct Loan, and/or Perkins Loan Programs, to permit the servicing of your ban(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account Identifier and to permit you to access your account Information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other lederal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bereau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a lean or a benefit on a foan, to permit the servicing or collection of your toan(s), to counsel you in repayment efforts, to enforce the terms of the foan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, to locate you if you become delinquorit in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, Indicates a potential violation of taw, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student ald questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargalining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0015. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this application, please write to: U.S. Department of Education, Washington, DC 20202-4651.

If you have questions regarding the status of your individual submission of this application, contact your logal holder (see Section 8).

SECTION 8: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

If you need fielp completing this form, call:

Closed School Discharge Log-In Worksheet (GSL095)

(b)(6) SSN_	N	(b)(6) ame	Scho	ool Code 00 7515	Recommendation 577
Aatch Dischar	ge Application Item 3 against the	e data base on the L109 screen	Write school code if Item 3 ma	atches data base.	
Item No.	Subject	Rejected	Denied (Deny Reason)	Approved	Comments
Disb. Date	Dish Date		Prior to 1/1/86 (79)	1/1/86 or later	
Item 3.	School Name	Blank	Not Closed (82)	Closed list match	
Item 5	School Address	No match or Blank - research		Closed list match	
Item 6	Attendance dates		More than 90 days (77)	90 days or less	
Item 8	Completed Program	Blank	Yes (80)	No	
Item 8a	Enrolled When Closed	Blank	No: more than 90 days (77)	Yes or No (90 days or less)	
Item 8b	Voluntary Withdrawal		Yes: more than 90 days (77)	No or Yes or Blank (90 days or less)	
Item 8c	Leave of Absence	Yes with no info provided		No or Blank or Yes within time frame	Approve if dates allow
Item 9	Completed Program at another School	Blank	Yes (74) Disregard if #11 is No	P)	
Item 10	Completion in Progress at another School		Yes (74) Disregard if #11 is No	No	
Item 11	Transfer Credits		Yes (74)	No	
Item 12	Start Program over from Beginning		No (74)	Yes	
Item 13	Bank/Lender Refund	Yes with no amt, included		No/Blank Don't Know	Yes - Subtract during refund
Item 14	Claim for Tuition	Blank or yes with no refund amt.		No Don't Know	Yes - Subtract during refund
Signature	Blank .			Present	



LOAN DISCHARGE APPLICATION: UNPAID REFUND Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

	Disease order as assessed the following later with the
	Please order or correct the following Information: SSN (b)(6)
w v	Name (b)(6)
	Address
067 Elti	City, State, Zip (b)(6)
()0+00	Telephone – Home (b)(6)
00 (1	Telephone Other
· n · · ·	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
	ns and other Information on the following page. If the school that you believe not to resolve this issue before applying for an unpaid refund loan discharge. If you up a pagent borrower applying for a PLUS loan discharge, bodin with than 1.
1. Student's name (last, first_reliddle initial): (b)(6)	2. Student's SSN: (b)(6)
3a. School's name:	3b. School's address (street, city, state, zip):
Robert Fiance hair, Desigh	2435 Grand Concourse Bronx, NY. 1045
4. Is this school still open? Yes No Don't Know	5. If this school is closed, were you (or, for PLUS borrowers, was the student) attending the school when it closed? Yes No
Ga. Do you have any other pending or approved application(s) for discharge of	a loan you obtained to attend this school? Yes No
	on 6, on the folloying page) made a refund or payment for any loan for which you are
	er to Item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7c
7a. Reason for discharge, religid or payment: 11 m paying	every 2 week out my Chesk
7b. From whom did you request the discharge, refund or payment (include lefe) Chek and is no resourt fully st	phone numbers it is parting out at my pay
7c. Amount you received or that you expect to receive: \$	
SECTION 3: REFUND INFORMATION	
	paid refund, attach a copy to this form. If you believe that the amount of the refund I don't believe that the amount is correct or if you don't have this documentation, I information, write "Oon't Know."
8. What amount do you believe the school owes you? \$	
9. Why do you believe the school owes you this amount?	
10. Your (or, for PLUS borrowers, the student's) first and last dates of attendant	ce at the school: ☐ OR Wever Attended
11. Your (or, for PLUS borrowers, the student's) program of study at the school	
12. Items 12a and 12b request information about the amount of the school's of which the loan was intended. For example, if you received a loan for the sinat quarter only. However, if you received a loan for the winfor and spring than one loan and the loans were for different periods of enrollment, providusing a separate sheet of paper for your additional response(s).	narges or the amount of the financial aid you received for the period of enrollment for pring quarter only and you left school during the spring quarter, provide an amount for quarters, provide the fotal amount for both quarters. If the unpaid refund is for more the amounts requested in Item 12a or 12b for each period of enrollment separately,
 Items 12a and 12b request information about the amount of the school's chamber the loan was intended. For example, if you received a loan for the sinat quarter coly. However, if you received a loan for the winter and spring than one loan and the loans were for different periods of enrollment, providusing a separate sheet of paper for your additional response(s). If your (or, for PLUS borrowers, the student's) last date of attendance was enrollment for which the loan was intended. Include tuition, lees, and other than the loan was intended. 	narges or the amount of the financial aid you received for the period of enrollment for pring quarter only and you left school during the spring quarter, provide an amount for quarters, provide the total amount for both quarters. If the unpaid refund is for more to the amounts requested in Item 12a or 12b for each period of enrollment separately, to before October 7, 2880, enter the amount of the school's charges for the period of er school charges.
 Items 12a and 12b request information about the amount of the school's chapter the loan was intended. For example, if you received a loan for the sinat quarter coly. However, if you received a loan for the winter and spring than one loan and the loans were for different periods of empliment, providusing a separate sheet of paper for your additional response(s). If your (or, for PLUS borrowers, the student's) last date of attendance was enrollment for which the loan was intended. Include fution, fees, and oth If your (or, for PLUS borrowers, the student's) last date of attendance was received for any part of the period of enrollment for which the loan was intended. 	narges or the amount of the financial aid you received for the period of enrollment for pring quarter only and you left school during the spring quarter, provide an amount for quarters, provide the total amount for both quarters. If the unpaid refund is for more to the amounts requested in Item 12a or 12b for each period of enrollment separately, as before October 7, 2000, enter the amount of the school's charges for the period of er school charges.
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 Items 12a and 12b request information about the amount of the school's change the foan was intended. For example, if you received a loan for the sithat quarter only. However, if you received a loan for the winter and spring than one loan and the loans were for different periods of enrollment, providusing a separate sheet of paper for your additional response(s). If your (or, for PLUS borrowers, the student's) last date of attendance was enrollment for which the loan was intended. Include fulfion, lees, and oth If your (or, for PLUS borrowers, the student's) last date of attendance was received for any part of the period of enrollment for which the loan was intended. Attach a copy of any documentation that supports your responses to Items school's catalog, refund policy, brition bill(s), enrollment contract, student a 	narges or the amount of the financial aid you received for the period of enrollment for pring quarter only and you left school during the spring quarter, provide an amount for quarters, provide the total amount for both quarters. If the unpaid refund is for more to the amounts requested in Item 12a or 12b for each period of enrollment separately, so before October 7, 2000, enter the amount of the school's charges for the period of er school charges. So on or after October 7, 2000, enter the total amount of federal grants and loans tended. 8 through 12. Examples of documentation may include, but are not limited to, the coount statement, registration forms, withdrawal form, attendance records, and any
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 Items 12a and 12b request information about the amount of the school's check the loan was intended. For example, if you received a loan for the sithat quarter colly. However, if you received a loan for the winter and spring than one loan and the loans were for different periods of enrollment, providusing a separate sheel of paper for your additional response(s). If your (or, for PLUS borrowers, the student's) last date of attendance was enrollment for which the loan was intended. Include fulflon, fees, and oth 12b. If your (or, for PLUS borrowers, the student's) last date of attendance was received for any part of the period of enrollment for which the loan was intended. Attach a copy of any documentation that supports your responses to items school's catalog, refund policy, tuition bill(s), enrollment contract, student a correspondence from the school that contains information about the refund SECTION 4: BORROWER CERTIFICATION If received each loan for which item requesting a discharge on or after Jamy (or, for PLUS borrowers, the student's) school account to pay the amount of the pay the sindent's properties that the school of the pay the sindent's properties that the school of the pay the sindent's properties that the school of the pay the sindent's properties that the school of the pay the sindent's properties that the pay the sindent's properties that the school of the pay the sindent's properties that the pay the sindent's propertie	narges or the amount of the financial aid you received for the period of enrollment for pring quarter, only and you left school during the spring quarter, provide an amount for quarters, provide the total amount for both quarters. If the unpaid refund is for more the amounts requested in item 12a or 12b for each period of enrollment separately, as before October 7, 2000, enter the amount of the school's charges for the period of er school charges. So on or after October 7, 2000, enter the total amount of federal grants and loans tended. Shrough 12. Examples of documentation may include, but are not limited to, the count statement, registration forms, withdrawal form, attendance records, and any lyou believe the school owes you.
 Items 12a and 12b request information about the amount of the school's chabition the loan was intended. For example, if you received a loan for the sinal quarter only. However, if you received a loan for the winter and spring than one loan and the loans ware for different pendes of enrollment, providusing a separate sheet of paper for your additional response(s). If your (or, for PLUS borrowers, the student's) last date of attendance was enrollment for which the loan was intended. Include fuition, fees, and oth If your (or, for PLUS borrowers, the student's) last date of attendance was received for any part of the period of enrollment for which the loan was intended. Include fuition, fees, and oth Attach a copy of any documentation that supports your responses to items school's catalog, refund policy, fuition bill(s), enrollment contract, student a correspondence from the school that contains information about the refund SECTION 4: BORROWER CERTIFICATION My signature below certifies that— I received each loan for which I am requesting a discharge on or after Jar my (or, for PLUS borrowers, the student) school account to pay the amount of some or all of my loan funds. Except as explained in Section 2, entitled, from the school or any bird party. I have read and agree to the terms and conditions for loan discharge, as an account to the party. 	narges or the amount of the financial aid you received for the period of enrollment for pring quarters, provide the total amount for both quarters. If the unpaid refund is for more the amounts requested in item 12a or 12b for each period of enrollment separately, so before October 7, 2000, enter the amount of the school's charges for the period of er school charges. So on or after October 7, 2000, enter the total amount of federal grants and loans tended. So through 12. Examples of documentation may include, but are not limited to, the count statement, registration forms, withdrawal form, attendance records, and any lyou believe the school owes you. The period of enrollment to the loan funds directly, or they were applied as a credit to punt owed to the school. Every 1, 1986. I received the loan funds directly, or they were applied as a credit to punt owed to the school. Every 1, 1986 and 7, I have not received this refund, or any benefit of a refund to which I am

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund Issue before applying for this type of discharge.
- If you (or, for PLUS borrowers, the student) are currently attending the school, you are not eligible for this type of discharge. You should contact the school about the refund that you believe you are owed.
- If you (or, for PLUS borrowers, the student) were enrolled when the school closed or withdrew from the school within 90 days before the school closed and you (or, for PLUS borrowers, the student) did not complete the program of study at another school, you may wish to apply for a closed school foan discharge rather than an unpaid refund discharge. If you are unsure about which type of toan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using dark link. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2005" = "07-01-2005"). If you need more space to enswer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program Includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) were entolled.
- The student (as in for, for PLUS between, the student') refers to the student for whom a parent between obtained a Federal PLUS Lean or Direct PLUS Lean.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a tultion recovery program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- I lagree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- I assign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- I understand that this request may be denied, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- I understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that i knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are §428(b)(2)(A) of seq. and §451 of seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) of seq. and 20 U.S.C. 1087a of seq.) and the authority for collecting and using your Social Security Number (SSN) is §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the Information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, fortestrance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become definquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our local programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become definquent in your foan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking rufunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment student enrollment student enrollment student.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send if to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0958. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete end review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651.

If you have questions regarding the status of your individual submission of this form, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.) If you need help completing this form, call:





LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No 1645-0058 Form Approved Exp. Data 10/31/2004

WARNING: Any person who knowingly makes a false statement or misropresentation on this form or on any accompanying documents shall be subject to penalties which may include lines, imprisonment or both, under the U.S. Criminal Code and 20 U.S. C. 1087 SECTION 1: BORROWER IDENTIFICATION Please enter or correct the following information. If you make a correction, check this (b)(6) (b)(6) Name (b)(6 Address _ City, State, Zip _ Telephone - Home Telephone - Other (E-mail (optional) SECTION 2: LOAN AND SCHOOL INFORMATION Before responding, carefully read the unitre form, including the instructions and other information on the following page. If you are a student borrower applying for loan discharge, begin with item 3. If you are a parent borrower applying for a PLUS loan discharge, begin with item 1. 2. Student's (b)(6) De land that any three and the state of the second that you pollege awas you a follend: 4. Is this school still open? Thes Dan Don't Know 5. If this school closed, were you (or, for PLUS porrowers, was the student) attending when it closed? BYES CI No 1045 Do you have any other application for discharge, pending or approved, for a loan you obtained to attend this school? ☐ Yes b. Has your school or any third party (see definition of "third party" in Soction B, on the following page) made a payment for any loan for which you are requesting a discharge, or is any such payment being considered? Yes Dinc If your answers to items 6a and 5b are "No," proceed to Section 3. If your answer to item 6a or 6b is "Yes," provide the information requested in items 7a, 7b, and 7c for each discharge or payment. If known (use a separate shoot of paper if you need to report more than one discharge or payment). a, Bactors for discharge or payment: b From whom (include telephone number) was the discharge or payment requested?) c Amgunt received. SECTION S: REFUND INFORMATION (DIM VI) & CLUT HOU (IN LOCK MO TO VI) WORKS

If you have documentation from the school showing the amount of the unpaid retund, attach a copy to this form. If you agree with the amount, go on to Section 4.

If you don't agree with the amount or you don't have this documentation, complete items 8 through 13 If you don't know the response to an item in this section, vale Ca write "Bon't Know anile 8 What amount do you believe 9 Why do you believe the school owes you this amount? the school owes you? Stolen torrousen 11 Your (or, for PLUS borrowers, the student's) 1 08 🖾 Never Attended program of study at the school. 12 This item requests the total amounts related to the period of enrollment for which the loan was intended. For example, it you received a loan for the spring quarter only and you left school during the spring quarter, provide an amount for that quarter only, However, If the loan was received for the winter and spring quarters, provide the total amount for both quarters a If your (or, for PLUS borrowers, the student's) last date of attendance was before October 7, 2000, enter the amount of the school's charges for the period of enrollment for which the loan was intended. Include tuition, fees, and other school charges in the amount * b If your (or, for PLUS borrowers, the student's) last date of attendance was on or after October 7, 2000, enter the total amount of federal grants and loans received for any part of the period of enrollment for which the loan was intended." If the unpaid refund is for more than one loan and the loans were intended for different periods of enrollment, provide the amounts requested in Item 123 or 125 for each period of enrollment separately, using a separate sheet of paper for your additional response(s). 13. Attach a copy of any documentation that supports your resconses to Items 8 though 12. Examples of documentation may include, but are not limited to, the school's catalog, refund policy, tuition bill(s), enrollment contract, student account statement, registration forms, withdrawal form, attendance records, and any correspondence from the school that contains information about the refund you believe the school owes you. SECTION 4: BORROWER CERTIFICATION My signature below certifies that -- Each loan for which I am requesting a discharge was received by me, in whole or in part, on or after January 1, 1986. Those funds were either received by me directly or applied as a credit to my (or, for PLUS borrowers, the student's) school account to pay the amount owed to the school.

- I (or, for PLUS borrowers, the student) did not attend the school or, within the timeframe that would entitle me to a refund, withdrew or was terminated from the school.
 Except as identified in Section 2, Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am entitled, from the school or any third party.
- I have read and agree to the terms and conditions that apply to this unpaid refund discharge, as specified in Section 7 on the following page
- . Binder penalty of gengury, affect the information, Have provided on this application and in any accompanying documentation is true and accurate to the best of my

(b)(6)

Date

e / CO-PO CO

SECTION 6: INSTRUCTIONS FOR COMPLETING THE FORM

Belore you complete this application, you need to know that -

- if the school is currently open, you may not apply for this type of discharge unless you have that contacted the school and attempted to resolve the issue is not resolved, you may then apply for this type of discharge.
- SY You may not apply for this type of discharge if you are currently attending the school, if you (or, for PLUS horrowers, the student) are still attending the school, you cheuld contact the school about the refund.
- if your school closed while you were enrolled (or if you withdraw from the school within 80 days before the school closed) and you did not complete your program of study at another school, you may wish to apply for a loan clockage based on the achoel's closure rather than a discharge based on the unput refund. If you are unsure about which type of loan discharge is night appropriate for you, contact your loan holder at the address shown in Gestlen 9.

Whose completing this form, type or print using dark ink. For all dates, give month, day (if known), and year, Show dates as MM-DD-YYYY (for example, "July 61, 2001" = "07-01-2001"). If you need more space to enswer any of the items, continue on separate sheets of paper and attach them to this form, indicate the number of the items, so without your name and sold security number (SSN) on all attached pages, if a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stational Leans (both subcidized and unsubsidized), Federal Supplemental Leans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Leans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program Includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct PLUS Loans (Direct Consolidation Loans), Federal Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any andorser's obligation) to repay the portion of the loan that should have been refunded. Any account interest and other charges associated with the unpaid refund will also be discharged, and you will be relimbersed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. The loan helder reports the discharge to all credit reporting agencies to which the loan helder previously reported the status of the loan.
- 🖚 The student refers to the student for whom a parent borrower obtained a Pederal PLUS Loan or Direct PLUS Loan.
- Third party releas to the holder of a performance band, a State or other agency offering a tuition receivery program, or any other entity that may reimburse you for a refund that you are even.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- 1 assign and transfer to the Department any right to recovery on the amount discharged that i may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- # 1 understand that this request may be defined, or my discharge may be revoked, if 1 fall to cooperate, provide documentation, or meet any of the other terms of my ogreement on this form.
- 1 understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and ariminal population under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice: The Privacy Act of 1974 (6 U.S.C. 652s) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are 420(b)(2)(A) of seq. and 451 of seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) of seq. and 20 U.S.C. 1087a of seq.) and the authority for collecting and using your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the authority for collecting and using your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the authority for collecting one using your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the authority for collecting your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the authority for collecting your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the authority for collecting your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the authority for collecting your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the authority for collecting your Social Security Number (55R) is 484(a)(a) of the HEA (20 U.S.C. 1087a of seq.) and the seq. (20 U.S.C. 1087a of seq.) and the seq. (20 U.S.C. 1087a of seq.) and (20 U.S.C. 1087a of s

The principal purposes for collecting the information on this form, including your SSN, are to verify your (dentity, to determine your cligibility to receive a loan or a benefit on a loan (such as a determent, forbearance, discharge, or forgiveness) under the FFEL Program and/or Direct Loan Program, to partrait the servicing of your toun(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) becomes delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, cists, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to scalat us in administering our foon programs, to private parties such as relatives, present and former, employers, business and parties are to credit bureau organizations, to aducational institutions, and to contrasters in order to verify your identity, to closeration event explains or a benefit on a local, to partie the servicing or collection of your local(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible froud and to voilty compliance with federal cludent financial aid program regulations, to locate you if you become definquent in your loan payments or if you detault, to provide default not collections, to provide linearity information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment states.

in the event of Etipation, we may send records to the Department of Justice, a court, adjudicative body, course), party, or witness if the disclosure is rejevent and necessary to the fitigation. If this information, either alone or with other information, indicates a potential violation of law, we may cerd it to the appropriate authority for action. We may send it to indicate a fitter of the information to members of Congress II you ask them to help you with federal student aid questions, in circumstances involving employment complaints, prievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the leades. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.D. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act extegulards.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid DMB control number, The valid DMB control number for this information collection is restimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Edication, Wachington, DC 20202-4651

If you have any commonts or concerns regarding the status of your included a submission of this form, write directly to the address shown below.

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Return the completed from discharge application and any attachments to: (If no address is shown, return to your loan helden.) If you need help completing this form, cell: (If no phone number is shown, cell your teen holder.)



LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

ONE No. 1845-0058 Form Approved Exp. Data 18/21/2984

WARNING: Any person who knowingly makes a take attriement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include fines imprisonment or both most the U.S. Criminal Code and 20 U.S. C. 1907.

which may include fines, imprisonment or both, under the U.S. Cri	minai Code and 20 U.S.C. 109	77.			
SECTION 1: BORROWER IDENTIFICATION					
# 007515	Please enter or come this box (b)(6)	et the following infor	mation. If you make a	correction, c	heck
	(b)(6)				
	Address (b)(6)				
	City, State, Zip)(6)			
•	Taiephone - Home ()		-	
	Telephone - Other ()			
	E-mail (optional)	ж			
ECTION 2: LOAN AND SCHOOL INFORMATION					
atore responding, corefully read the entire form, including the lastructions or loan discharge, begin with Item 3. If you are a parent borrower applying for		igin with Itam 1.	·	тожег арріу	ing
Student's name (last, first, midrile initial); (6)		2. Student's (b)(6)			
. Name and address (street, city, state, zip) of the school that you believe owes	s you a refund:		li open? 🗆 Yes 🗀 A		
806 W. Martin St & Palestine	Ah 44413		ad, were you (or, for PL iding when it closed?	The DOLLOWS	
a. Do you have any other application for discharge, pending or approved, for					⊠ No
 Has your school or any third party (see definition of "third party" in Section you are requesting a discharge, or is any such payment being considered.) made a payment for	any loan for which	☐ Yes	
. If your answers to Items 6a and 6b are "No," proceed to Section 3. If your ar 7c for each discharge or payment, If known (use a separate sheet of paper if	swer to item 6a or 6b is "	Yes," provide the info	rmustion requested in I	terns 7a, 7b,	and
a. Reason for discharge or payment: b. From whom (include telephone nu				ved or antici	p rte d:
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SECTION 3: REFUND INFORMATION					
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0. Your (or, for PLUS borrowers, the student's) first and last dates of attendance (O) 4 - - -	te at the school:	iever Attended pr	our (or, for PLUS borrow ogram of study at the s		dent's)
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b. If your (or, for PLUS borrowers, the student's) last date of attendance was tederal grants and loans received for any part of the period of enrollment to	on or after October 7, 200	00, enter the total arm		·- ·	
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SECTION 4: BORROWER CERTIFICATION	,	10500	THE WALL	٠٠٠٠٠٠	, , , ,
ly signature below certifies that -				_	
Each loan for which I am requesting a discharge was received by me, in whol directly or applied as a credit to my (or, for PLUS borrowers, the student's) a				sived by me	
I (or, for PLUS borrowers, the student) did not attend the school or, within the Except as identified in Section 2, Items 6 and 7, I have not received this ratur	timetrame that would entitl	e me to a refund, with	drew or was terminate		
I have read and agree to the terms and conditions that apply to this unpaid re	rfund discharge, as specific	ed in Section 7 on the	following page.	, ,	•
Under penalty of perjury, all of the information I have provided on this application and halled (b)(6)	iuon and in any accompan	уна ооситептацоп і	an enemone come euro s C.C. — Li		
Parrewer's Signature Pa	10e 10f 2	Date		<u> </u>	`
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SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know that -

- If the school is currently open, you may not apply for this type of discharge unless you have first contacted the acheol and attempted to resolve the leave, if the issue is not resolved, you may then apply for this type of discharge.
- W You may not apply for this type of discharge if you are currently attending the achool. If you (or, for PLUS borrowers, the student) are still attending the achool, you should contact the achool about the retund.
- If your school closed while you were enrolled (or if you withdraw from the school within 90 days before the school closed) and you did not complete your program of study at another school, you may wish to apply for a loan discharge based on the school's closure rather then a discharge based on the anpeid refund. If you are ensure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shows in Section 9.

When completing this form, type or print using dark tek. For all dates, give month, day (if known), and yeer. Show dates as MM-DD-YYYY (for example, "July 01, 2001" w "07-01-2001"). If you need more space to answer say of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address above in Section S.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- ILeas discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repey the portion of the loan that should have been refunded. Any accrued intensst and other charges associated with the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have need that exceeds the remaining balance of the loan after the discharge. The loan holder reports the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- III The student refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Third party refers to the holder of a performance bond, a State or other agency offering a tuition recovery program, or any other entity that may reimburse you for a refund that you are owed.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- It is gree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid retund discharge.
- III I assign and transfer to the Department any right to recovery on the amount discharged that I may have from the achool identified in Section 2 of this form and/or any owners, affiliates or assigns of the achool, and from any party that may pay claims for a refund because of the actions of the achool, up to the amounts discharged by the Department on my loan(s).
- i understand that this request may be denied, or my discharge may be revoked, if I fall to cooperate, provide documentation, or must any of the other terms of my appreciant on this form.
- I understand that if my loan is discharged based on any false, fictitious, or traudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable faderal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Natice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are 428(b)(2)(A) at say, and 451 at say, of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) at say, and 20 U.S.C. 1087a at say, and the authority for collecting and using your Social Security Number (SSN) is 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Femily Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loss or a benefit on a loss (such as a determent, forbestance, discharge, or forgiveness) under the FFEL Program and/or Direct Loss Program, to permit the servicing of your loss(s), and, if it becomes necessary, to locate you and to collect on your loss(s) if your loss(s) becomes delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to essist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to educational institutions, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to knyestigate possible fraud and to verify compliance with federal student financial aid program regulations, to locate you if you become delinquent in your loan payments or if you detail, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

in the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, prievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safequards.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651

If you have any comments or concerns regarding the status of your individual automission of this form, write directly to the address shown below.

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Return the completed loan discharge application and any attachments to:
(If no address is shown, return to year loan holder,)

If you need help completing this form, call: (If no phose number is shown, call your loan holder.)



4

LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 18/31/2004

WARNING: Any person who knowingly makes a false statement or milanamentation on this form or on any accompanying documents shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION			
	Diagra animi ne core	rect the Inlinuing informati	on, if you make a correction, check
# 099996	the hav	der mo ionomaid innomin	on, a you make a correction, creck
+ 011114	(b)(6)		
1	(b)(6)		
7: + T.	Name		
Polar + Fiance	Address)(6)	
()	City, State, Zip (b)		
	Telephone - Home	· /	
	Telephone - Other ()	
	E-mail (optional)		
SECTION 2: LOAN AND SCHOOL INFORMATION			
Before responding, carefully read the entire form, including the instructions and for loan discharge, begin with hem 3. If you are a parent borrower applying for a P	other information en LUS loan discharge, b	the following page, if you each with Item 1.	are a student borrower applying
Student's name (tast, first, middle in (b)(6)		2. Student (b)(6)	
3. Name and address (street, city, state, zip) of the school that you believe owes yo	u a petuod:	4 le this echosi still po	en? 🗆 Yes 🗷 No 💭 Don't Know
a. Hermo and address (stradt, att, adde, ap) of the school that you believe owes yo	o a retent.		were you (or, for PLUS borrowers, was
		the student) attending	
6. a. Do you have any other application for discharge, pending or approved, for a k	van you obtained to at	tend this school?	TYES TO NO
b. Has your school or any third party (see definition of "third party" in Section 6	on the following page	e) made a payment for any	
you are requesting a discharge, or is any such payment being considered?	- t - 11		☐ Yes ☑ N
 If your answers to Items 6s and 6b are "No," proceed to Section 3. If your answers to for each discharge or payment, it known (use a separate sheet of paper if you 	er to Hem balor 60 is i	"Yes," provide the informal than one discharge or payr	(ion requested in Items (2, 70, and I neat).
a. Reason for discharge or payment: b. From whom (include telephone numb			c. Amount received or anticipated
			3
SECTION 3: REFUND INFORMATION			
If you have documentation from the school showing the amount of the annual ra- if you don't agree with the amount or you don't have this documentation, complete			
write "Don't Know." 8. What amount do you believe 9. Why do you believe the school owes y	on this amount?		·····
the school owes you?	11 21	the 50	100/ 10/HHO
	attend		<u>. </u>
10. Your (or, for PLUS borrowers, the student's) first and last dates of attendance at			or, for PLUS borrowers, the student's in of study at the school
12. This item requests the total amounts related to the period of enrollment for which	th the loan was intend	ad. For example, it you rec	nived a loan for the spring quarter
only and you left school during the spring quarter, provide an amount for that qu			
provide the total amount for both quarters.	2		Fig. 11.
a. If your (or, for PLUS borrowers, the student's) last date of attendance was be charges for the period of annoliment for which the loan was intended, include	ore October 7, 2000.	enter the amount of the sc ir school charges in the am	noors 7
b. If your (or, for PLUS borrowers, the student's) last date of attendance was on	or after October 7, 20	00, enter the total amount	
lederal grants and loans received for any part of the period of enrollment for the	vhich the loan was int	ended.*	\$
If the unpaid refund is for more than one loan and the loans were intended for for each period of enrollment separately, using a separate sheet of paper for y	our additional respons	se(s).	
13. Attach a copy of any documentation that supports your responses to Items 8 the school's catalog, refund policy, tuition bill(s), enrollment contract, student accou- correspondence from the school that contains information about the refund you	int statement, registra	tion forms, withdrawal for:	le, but are not limited to, the m, attendance records, and any
	Deserte the school ow	700.	
SECTION 4: BORROWER CERTIFICATION			
SECTION 4: BORROWER CERTIFICATION My signature below certifies that — Each loan for which I am requesting a discharge was received by me, in whole o	r in part, on or after Ja	anuary 1, 1986. Those ture	ds were alther received by me
SECTION 4: BORROWER CERTIFICATION My signature below certifies that — Each loan for which I am requesting a discharge was received by me, in whole ordirectly or applied as a credit to my (or, for PLUS borrowers, the student's) school of the company of the com	of account to pay the trame that would entit	amount owed to the school de me to a refund, withdrev	il. Yer was terminated from the school
SECTION 4: BORROWER CERTIFICATION My signature below certifies that — Each loan for which I am requesting a discharge was received by me, in whole o directly or applied as a credit to my (or, for PLUS betrowers, the student's) scho I (or, for PLUS borrowers, the student) did not attend the school or, within the time Except as identified in Section 2, Items 6 and 7, I have not received this refund, and the school or in the sc	of account to pay the strame that would entit or any benefit of a refu	amount owed to the school de me to a refund, withdrev and to which I am entitled,	il. y or was terminated from the school from the school or any third party.
SECTION 4: BORROWER CERTIFICATION My signature below certifies that — Each loan for which I am requesting a discharge was received by me, in whole ordirectly or applied as a credit to my (or, for PLUS borrowers, the student's) school (or, for PLUS borrowers, the student's) school (or, for PLUS borrowers, the student's) did not attend the school or, within the time Except as identified in Section 2, Items 6 and 7, I have not received this refund, or in have read and agree to the terms and conditions that apply to this unpaid refund. Under penalty of perjury, all of the interpretations.	of account to pay the strame that would entit or any benefit of a refu	amount owed to the school de me to a refund, withdrev and to which I am entitled,	of the school of the school of the school of the school or any third party, owing page, the and accurate to the best of my
SECTION 4: BORROWER CERTIFICATION My signature below certifies that — Each loan for which I am requesting a discharge was received by me, in whole o directly or applied as a credit to my (or, for PLUS borrowers, the student's) scho I (or, for PLUS borrowers, the student) did not attend the school or, within the time Except as identified in Section 2, Items 6 and 7, I have not received this refund, and the school or in the sc	of account to pay the strame that would entit or any benefit of a refu	amount owed to the school de me to a refund, withdrev and to which I am entitled,	il. y or was terminated from the school from the school or any third party.

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LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Data 10/31/2004

WARNINE: Any person who knowingly makes a talse statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include times, impresentment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

	SECTION 1: BORROWER IDENTIFICATION		
)		Please coller or corre	ect the following information. If you make a correction, check
		MITTER TO THE COLUMN TO THE CO	say to soming watermarrow it you make a correction, check
		SSN (b)(6)	
		(b)(6)	
		Name	
	1101 05/0	Address	
	Nocarie	Day out 715 (b)	(6)
	'	City, State, Zip (b)(
,	NSLDS(2)	Talaphona - Hor	1 /
-	$\Delta \Delta \Delta \Delta C = 0$	Telephone - Othar (
_	00 (313	E-mail (optional)	
	SECTION 2: LOAN AND SCHOOL INFORMATI		
	T		
	for loan discharge, begin with liem 3 if you are a second	sing the instructions and other information on 	the fallowing page. If you are a student borrower applying
	1 (b)(6)	ppying to bi Las tour bushings, b	2. Student's (b)(6)
	Section 2010		(b)(6)
	3	uat you believe owns you a relund.	4. Is this science upon Direct Wine U Deal Know
	Supert FLANCE BOOM	tu School	5. If this school closed, were you (or, for PLUS borrowers, was the student) attending when it closed? So Yes C) No
	6. a Do you have any other application for discharge, per	politic or approved, for a loan you obtained to at	
•	b. Has your school or any third party (see delmilion of	"third party" in Section 6, on the following page	c) made a payment for any loan for which
	you are requesting a discharge, or is any such paym		☐ Yes W No
	7r for each discharge or payment, it known (use a sep		"Yes," provide the information requested in items 72, 75, and than one discharge or payment)
		(include talephone number) was the discharge	
	SECTION 3: REFUND INFORMATION		
	"If you have ducumentation from the school showing the If you don't agree with the amount or you don't have this write "Don't Know."	emporal of the unpaid reland, effect a copy to documentation, complete items 8 through 13. I	this form. If you agree with the amount, go on to Section 4 If you don't know the response to an Item in this section.
	8 What amount do you believe 9. Why do you	believe the school owes you this amount?	ecause I dian't finish
	Tool of the State of Progresul	in when the setto	outlined I I didn't have
	10. Yours or, for PLUS borrowers, the student's first and	ast dates of altandance at the school.	Never Attended Long ram of study at the settlents)
	only and you left school during the spring quarter, pro	lod of enrollment for which the loan was intend vide an amount for that quarter only. However, i	led. For example, if you received a loss for the spring quarter if the loss was received for the winter and spring quarters.
	provide the total amount for both guarters a N your (or, for PLUS borrowers, the student's) last of charges for the period of enrollment for which the to		
	b If your (or, for PLUS barrowers, the student's) last d	late of attendance was on or after October 7, 20	00, enter the total amount of
	ledgral grants and loans received for any part of the		encod. provide the amounts requested in item 12a or 12b
	for each period of enrollment separately, using a sep		
	13 Attach a copy of any documentation that supports you school's catalog, refund policy, turton blif(s), enrollme correspondence from the school that contains information.	ni conicact, studeni account statement, registral	tion forms, withdrawal form, attendance records, and any
	SECTION 4: BORROWER CERTIFICATION	THE SCHOOL WE LEIGHT AND RESEAS THE SCHOOL OM	, you.
	My signature below certifies that -		
	. Each loan for which I am requesting a discharge was re	ceived by me, in whole or in part, on or after Ja	inuary 1, 1985. Those funds were either received by me
	directly or applied as a credit to my (or, for PLUS home		
			le me to a refund, withdrew or was terminated from the school and to which I am entitled, from the school or any third party
	- 1 have read and agree to the terms and conditions that a	apply to this unpaid retund discharge, as specifi	led in Section 7 on the following page.
	 Under penalty of percury, all of the information I have preferred (b)(6) 	rovided on this application and in any accompan	nying documentation is true and accurate to the best of my
	Petros.		3/1/03
	36.47	Page 1 of 2	Date /
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	\$ 8 024.44	₹,	
	9/	·	the second secon

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Defore you complete this application, you need to know that -

- if the school is currently open, you may not apply for this type of discharge unless you have first contacted the school and attempted to resolve the Issue. If the issue is not resolved, you may then apply for this type of discharge.
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- Whird party tolers to the helder of a performance bond, a State or other agency offering a tultion recovery program, or any other entity that may relimburse you for a relient that you are ownd.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, office documentation reasonably available to me that demonstrates that I must the qualifications for an enough related in the Department's designee, upon request, office documentation reasonably available to me that demonstrates that I must the qualifications for an enough discharge.
- is a solon and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, attitiates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my local(s).
- I understand that this request may be denied, or my discharge may be revoked, if I tall to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
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The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of seconds. The routine uses of this information include its disclosure to lederal, state, or focal agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administrating our fear programs, to private parties such as relatives, present and commer employers, business and personal associates, to credit bureau organizations, to educational institutions, and to confinctions in order to verify your identity, to determine your eligibility to receive a loan or a bonofit on a loan, to permit the servicing or collection of your loan(s), to coursel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible found and to verify compliance with federal student financial aild program regulations, to locate you if you become delinquent in your toan payments or if you default, to provide distault rate calculations, to provide financial aild history information, to assist program administrators with tracking relunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment states.

to the event of litigation, we may send records to the Department of Justice, a count, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the higheston. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions, the incompanies movelying employment complaints, gravances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargataing opportunity, we may disclose records to allow organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

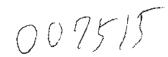
Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this Information collection is 1845-0050. The time required to complete this information collection is studied to average 0.5 hours (30 minutes) per responce, including the time to review instructions, search existing data resources, gather and maintain the data needed, and conspicts which replacements of the information collection. If you have any comments controlled the information of information of the information of t

Dyou have any comments or concerns regarding the status of your individual submission of this form, wille directly to the address shown below.

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Return the completed loss vischarge application and any ettachments to: (If no address is shown, rotum to your loan holder.) If you need help completing this form, tall: (If no phone number is shown, call your lose helder.)







LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 18/31/2004

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SECTION 1: BORROWER IDENTIFICATION		···	
, /	Disease anter or com-	of the following informati	on. If you make a correction chack
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	(b)(6)		
hert Fiarce	Address (b)(6)	6)	
1 110 DOCIAL MASLO	City, State, Zip	7.	
LIV 1 205194 ()	Telephone - Home Telephone - Other	0)(6)	
011 000 31	E-mail (ootional)		
SECTION 2: LOAN AND SCHOOL INFORMATION	Talliffe (Obtours)		
Before responding, carefully read the antire form, including the instruc-	flore and other information on	the following page If you	are a student hormunt annhance
for loan discharge, begin with Itam 3. If you are a parent borrower applying		igin with Itam 1.	and a supplied own to met applied
, first, middle inkial):		2. Student'r ceu- (b)(6)	- 47
3. Rame and address (street, city, state, zip) of the school that you believe	oyees you a refund:		en? 🗆 Yes 💋 160 🗇 Don't Know
18ths SMINSTE Rd. Robert FEIN		the student) stranding	
 a. Do you have any other application for discharge, pending or approve b. Has your school or any third party (see definition of "third party" in: 	The second secon		Yes O-No
you are requesting a discharge, or is any such payment being consid		у нишен и разгляни пос виу	Tes O No
 If your answers to items 6a and 6b are "No," proceed to Section 3. If y 7c for each discharge or payment, if known (use a separate sheet of pa 	our answer to item 6a or 6b is ' per if you need to report more t	han one discharge or payr	nent).
A Beason for discharge or payment: b. From whom finclude telephon 11-6-6-600/ Jacoy's affice I started	ne number) was the discharge	or payment requested?	c. Amount received or anticipated: \$ OVER 4,000-40
SECTION 3: REFUND INFORMATION			
If you have documentation from the school showing the amount of the all you don't agree with the amount or you don't have this documentation, write "Don't Know."			
C. Marin and the control of the cont	olowes you this amount? time and I did	not sign and	this was told heeks and page of wer were heeks and page of were
10. Your (or, for PLUS borrowers, the student's) first and last dates of atte		/ II. 10th (i	or, for PLUS borrowers, the student's) in of study at the school:
12. This Item requests the total amounts related to the period of enrollment only and you left school during the spring quarter, provide an amount it provide the total amount for both quarters.	it for which the loan was intend- for that quarter only. However, if	d. For example, if you rec the loan was received for	elved a loan for the spring quarter the winter and spring quarters,
a. If your (or, for PLUS borrowers, the student's) last case of attendanc charges for the period of snrollment for which the loan was inkended			
 b. If your (or, for PLUS borrowers, the student's) last date of attendance federal grants and loans received for any part of the period of enrolled 	ment for which the loan was into	nded.*	\$ UNKNOWING
If the unpaid retund is for more than one loan and the loans were interested to period of enrollment separately, using a separate sheet of present and present			VALUES (EQUESTED IN MENT) 128 OF 120
Attach a copy of any documentation that supports your responses to it schools catalog, refund policy, tuition bli(s), enrollment contract, studio correspondence from the school that contains information about the re	ems 8 though 12. Examples of ent account statement, registrat	socumentation may included to forms, withdrawal forms	e, but are not limited to, the n, attendance records, and any
SECTION 4: BORROWER CERTIFICATION			
My signature below certifies that			
 Each loan for which I am requesting a discharge was received by me, in directly or applied as a credit to my (or, for PLUS borrowers, the studer 			
 I (or, for PLUS borrowers, the student) did not attend the school or, with Except as identified in Section 2, Itams 6 and 7, I have not received this 	n the timetrame that would entitle refund, or any benefit of a rifu	e me to a refund, withdrew no to which I am entitled,	or was terminated from the school. from the school or any third party.
 i have read and agree to the terms and conditions that apply to this unp 	ald refund discharge, as specifi	ed in Section 7 on the foli	owing page.
Linder penalty of perfero all falls information I have provided on this a knowledge and beile (b)(6)	opplication and in any accompan	ying documentation is tru —	a and accurate to the best of my
Sorrewer's Signature	Page 1 of 2	Date	
	Faga IVIZ	/	1,090.

R.

SECTION 8: INSTRUCTIONS FOR COMPLETING THE PORM

Soloto per complete this application, you need to know that -

- 30 If the echical is currently open, you may not apply for this type of discharge unless you have first contacted the school and attempted to resolve the lesse. If the lesse is not received, you may then apply for this type of declarge.
- III You may not nearly for this type of discharge if you are currently attending the school. If you (or, for PLUS horrowers, the student) are still attending the school, you should contact the acheol about the retund.
- 20 If your school closed while you were serolled (or If you withdrew from the school within 90 days before the school closed) and you did not complete your program of study at another school, you may wish to apply for a loan decharge based on the action?'s closure rather than a discharge based on the unpaid refund. If you are secure about which type of lash discharge is most appropriate for you, contact your loan holder at the address about in Section 9.

When completing this form, type or print ming dark link. For all deles, give month, day (If Imount), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2001" = "07-01-2001"). If you need more space to secure any of the Herra, continue on separate sheets of paper and attach them to this form, include the number of the item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a return in owned for more than one student or from more than one subject. parate forms for each student or achoot.

Return the completed form and any effectionests to the address about in Section

RECTION & DEFINITIONS

- The Federal Family Education Lean (FPEL) Program Includes Federal Stations (both subsidized and unsubsidized), Federal Supplemental Loans for Statems (SLS), Federal PLUS Loans, and Federal Consolidation Librar.
- m The William D. Ford Federal Direct Lean (Direct Lean) Progress Includes Federal Direct Stafford/Ford Leans (Direct Subsidized Leans), Federal Direct Unsubsidized Staffard/Ford Loans (Direct Unauthicitized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Ill Less discharge due to an uspaid refund cancers your obligation (and any endorser's obligation) to repay the pertion of the loss that should have been refunded. Any accuracy interest and other charges associated with the sepaid refund will also be discharged, and you will be reimbursed for any amount that you have rapaid that an ng belance of the loan after the discharge. The loan helder reports the discharge to all cradit separating apparaise to which the loan holder previously reported the AND IN THE LOCAL
- III. The student refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- If Third party refers to the holder of a performance bond, a State or other agency offering a tailion recovery program, or any other entity that may relimberse you for a refined that you are owed.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE MASSED ON UNRAID REFUND

- we to cooperate with the U.S. Department of Education (the Department) or the Department's designee to any enforcement action related to thin application and to dide to the Department or the Department's designee, upon respect, other decumentation responsibly evaluable to me that demonstrates that I meet the qualifications for on unused refund discharge.
- III) assign and transfer to the Department any right to recovery on the amount displayed that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the achool, and from any party that may pay claims for a return because of the achoot, up to the amounts discharged by the Department on my losse(s).
- 20 I understand that this request may be decied, or my discharge may be revoked, If I fall to cooperate, provide documentation, or meet any of the other farms of my agreement on this force.
- III i understand that if my lean is discharged based on any tales, fictitious, or traudulent statements that I knowledgy made on this form or on any accompanying docume may be subject to club and criminal parallies under applicable tederal law.

SECTION &: MAPORTANT NOTICES

Privacy Act Notice: The Privacy Act of 1974 (5 U.S.C. 552s) requires that the following notice he provided to you:

The authorities for collecting the requested information from and about you are 428(b)(2)(A) at seq. and 451 at seq. of the Higher Education Act of 1955, as amended (20 U.S.C. 1078(b)(2)(A) at seq. and 25 U.S.C. 1097a at seq.) and the suthority for collecting and using your Social Security Number (SSN) is 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Femily Education Loan (FFEL) Program or the William D. Ford Pederal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loss or a benefit on a loan (such as a determent, fortestesse, discharge, or torphreness) under the FFEL Program and/or Direct Loan Program, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) becomes delinquent or in details. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching pregrams, to agencies that we authorize to sesiel as in administering our loan programs, to private parties such as relatives, present and foreser employers, business and personal associates, to credit bureau organizations, to somewhere any our men programs, to press parses such as reserved, present and parsons an personal association, to contractors in order to verify your lendity, to determine your eligibility to receive a loan or a benefit on a loan, to personal the servicing or collection of your learns), to teams you in repayment the service to service the service to teams of the loan(s), to teams of the loan(s), to team to verify compliance with federal student financial sid-program; regulations, to libidity you it you become definquent in your loss payments or if you default, to provide default rate calculations, to provide financial sid-bistory information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student strollment status.

In the event of Stigation, we may send records to the Department of Justice, a court, adjudicative body, courses, party, or witness if the disclosure is relevant and necessary to the Hitgation. If this information, either alone or with other information, inclusives a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grisvenous, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the lesses. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified meanwhars under Privacy Act sufaquents.

Sen Nelice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1846-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, getter and maintain the data needed, and complete and review the information collection. If you have any seatments sensorably the seasonably of the time estimate(s) or suggestions for improving this term, please complete and review the information collection. If you know any yes write to: U.S. Department of Education, Washington, DC 20202-4661

If you have say comments or sonceres regarding the status of your individual cubmission of this facts, write directly to the address shows below.

SECTION 8: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Return the completed less discharge application and ver attachs (If no address is shown, return to year lean holder.)

If you need help completing this form, said: (If he phone number is shown, sall your loan helder.)



LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No 1845-0058 Form Approved Exp. Data 10/31/2004

WARNING Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Oriminal Code and 20 U.S. C. 1097.

SECTION 1: BORRO	NER IDEN	TIFICATIO	N											
						Pie	ease enter or o	carre	ct the following	to Informa	ilian. If voi	և mak	ce a correction	check
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(b)(6) Name														
						14.0	dress (b)(6)	_			-	—		
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							lephone - Hor		0.00					
							lephone - Oth	•)					
Carrier a Laure	UD GOLLOG					E-	mail (optional)	<u> —</u>						
SECTION 2: LOAN A														
Before responding, careful for loan discharge, begin to	illy read the t vith Item 3 - If	entire torm ' you are a g	. Includii arent bo	ng the in Prower a	istructio polylna	ns and ollu for a PLUS	er information Ioan dischara	7 ON 1 Ic. be	ike following Join with Item	paga. If y 1	rou are a s	tuden	t borrower ap	plylng
(b)(6)	niddle init								2 Student's			100		
3. Name and address (str	et city state	zin) of the	school I	hat you h	allora c	Wires HOU 2 I	rafund		A le thie co	A STATE OF THE PARTY OF THE PAR	10002	Vac	GrNo CID	on't Voor
Robert France	2435 G	+0119 C	3011001 II	2 See	י שיפושי	ν υδ γ	i Gi Gi i Gi		5. If this set	tool closed	l, ware you	(ar, f	ar PLUS borra	
									the stude	nt) attendi	ng whon it	close	d? 🗇 Ya:	s (23 No
6 a Do you have any oth b. Has your school or a											ny Inan for	e which	<u> </u>	s CANO
you are requesting a	discharge, or	is any suci	paymer	nt beling d	conside	red?		, - ,					☐ Yes	
If your answers to Item 7c for each discharge o												uosted	l in Items 7a,	7b, and
a Reason for discharge									r payment re		c. Am	ount i	received or an	ticipated.
			-					=			<u></u>			
SECTION 3: REFUNE If you have documentation	trem the sci	hool showl	ig the ai	mount of	the uni	pald refund.	altach a cop	v to i	this form, if y	ou agreg	with the ar	тоип	t. ao on to Se	ction 4
If you don't agree with the write "Don't Know"	amount or yo	ou don't hav	o this do	ocumenta	ation, co	mpieta Iten	ns 8 through	is u	you don't kno	ow the res	ponse to a	in Iter	m In this secti	on,
8 What amount do you be the school owes you? \$		9 Why d	o you be	lieve the	school	owes you the			the time	ne all	beno	10	whhen	the war
10 Your (or, for PLUS born	owers, the ste	udent's) firs	t and las	t dates o	attend	lance at the	school	-		l _ btob	(or, for Pi	dy at l	arrowers, the :	student's)
12 This item requests the only and you left school provide the total amoust	l during the s	pring quarte	ha perio Ir, provid	d of enso ome ne et	liment i ount for	for which th r that quarie	e loan was int r only Howev	iondo er, if	d. For exampl the loan was	le, if you r	ecelved a l	loan fe	or the spring	quarter ters,
a If your (or, for PLUS charges for the perio	borrowers, th	e student's	fast date	e of atten	odanca i	was before (October 7, 200	00, e:	nter the amou	int of the s	chool's		(D25	.00
b if your (or, for PLUS federal grants and los	borrowers, th	o student's)	last dat	e of atter	rdance v	was on or a	iter October 7	, 200	O, actor the to			•	6 035	รักกิ
* If the unpaid refund if	s for more tha	an one fear	and the	loans wo	re Inton	ded for diffe	arent periods	of an	rollment, pro-	vide the ar	nounts rac	queste	ed in Item 12a	or 12b
13 Attach a copy of any do school's catalog, refund	cumentation to policy, tuition	lhat suppor n bill(s), en	s your r	esponses contract,	s to Hen studen	ns 8 though Laccount st	12 Examples latement, regis	s of d strati	locumentation on forms, with	may inclu hdrawal fo	ado, but ar arm, attend	re not fance	limited to, the records, and	any
SECTION 4: BORROW				u spont i	rue tern	ng you galle	iva tha school	owe.	s you					
My signature below certifie			-			· ·								
 Each loan for which I an 	requesting a	discharge	was rece	ived by a	mo, in v	vhole or in p	art, on or aite	er Jan	nuary 1, 1986	Those fu	nds were e	either	received by n	ne
directly or applied as a c I (or, for PLUS borrower Facest as Idealified in S	s, the student)	i did not atti	end the s	chool or.	within t	the time fram	n that would a	antillio	e mato a rotur	nd withdre	w er was i	termi	nated from the	school
Except as Identified in S • I have read and agree to	the terms and	d condition	that an	n receive ply to thi	o this ri Is undal	oruno, or an d rotund dis	y cenerii of a scharge, as so	ocitie re:un	ia to water I a ed in Section 2	am entitled 7 on the fo	o, rrom the Mowing na	scho Ide	oo or any thir	a party
 Under penalty of perjury knowledge and belief 	(b)(6)	A17							ying documen	itation is t		curate		of my
						Page 1 of 2				Date		(
Borrower's Signature														

September 29, 2003



Re: Unnaid Tuition Refun

Deal (b)(6)

This letter acknowledges receipt of your application for student loan discharge due to the school's failure to refund unused tuition to your loan account.

The U.S. Department of Education has determined that due to your early withdrawal from the school, you partially qualify for unpaid tuition refund discharge of your Federal Family Education Loan, which you obtained to attend ROBERT FIANCE HAIR DESIGN INSTITUTE. The loan period covered 3-10-88 to 12-10-88 and your withdrawal date was 6-1-88.

As a result of this determination:

- Your account has been credited with the unpaid tuition refund, which resulted in an overpayment of \$6,377.40;
- A check for that amount has been requested from the Treasury Department;
- Please allow 4-6 weeks for you to receive the check;
- Your account is now considered paid in full and will be closed when the refund posts;
- The Department will report the discharge to all reporting agencies to which it reports loan information so that the adverse credit history assigned to the loan will be deleted.

This discharge covers only the Federal Family Education Loan held by the U.S. Department of Education, listed above, which was obtained to attend ROBERT FIANCE HAIR DESIGN INSTITUTE. The Department has made no determination regarding loans, which may be held by guaranty agencies, servicers, lenders, or educational institutions. If you believe that you may be eligible for discharge of other loans, you should contact the holder of those loans.

If you have any questions regarding this matter, you may contact a Department representative by calling toll-free 1-800-621-3115.

Sincerely,

Zaldy A. Ralleta Loan Analyst



LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

CMB No. 1845-0058 Form Approved Exp. Date 18/31/2984

WARNING: Any person who introvingly makes a laise statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include times, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION		
		rect the following information. If you make a correction, check
	this box 🗇	
	SSN (D)(O)	
	Name (b)(6)	
	Address (b)(6)	
		(b)(6)
	Telephone - Home	(b)(6)
	Telephone - Other	(b)(6)
	E-mali (optional)	
SECTION 2: LOAN AND SCHOOL INFORMATION		
Sefore responding, carefully read the entire form, including the lestruct for loan discharge, begin with item 3. If you are a parent borrower applyin		
Student's name (last, first, middle initial):	V 101 2 1 200 1001 100101 101, 1	2. Student's SSN:
3. Name and autoress (street, city, state, zip) of the school that you believe		4. Is this school still open? Tyes SI-No Don't Know
Robert france Lawrence	0. ST	5. If this school closed, were you (or, for PLUS borrowers,was the student) attending when it closed?
6. a. Do you have any other application for discharge, pending or approve		
b. Has your school or any third party (see definition of "third party" in S		
you are requesting a discharge, or is any such payment being consid	lered?	☐ Yes GPNio
 If your answers to Items 6a and 6b are "No," proceed to Section 3. If you 7c for each discharge or payment, if known (use a separate sheet of payment. 		
a. Reason for discharge or payment: t. From whom (include telephone	ne number) was the discharge	or payment requested? c. Amount received or anticipated:
SECTION 3: REFUND INFORMATION		
If you have secumentation from the school showing the amount of the a If you don't agree with the amount or you don't have this documentation,	apaid retand, attech a 1999 k comolete Items & through 13 :	e take forms. If you agree with the amount, go on to Section 4. If you don't know the response to an item in this section.
write "Don't Know."		
What amount do you believe 9. Why do you believe the school name and all the school name and		0
the school owes you? good I did not finis	h the course	(I attended for 3 months)
10. Your (or, for PLUS borrowers, the student's) first and last dates of attack	ndance at the school:	11. Your (or, for PLUS borrowers, the student's)
10111-11-121918181 10131-11	- [1]9,818] OR 🗖	Never Attended program of study at the school (LDS/NC+0 LOC) 4
12. This item requests the total amounts related to the period of enrollment	t for which the loan was intend	sed. For exemple, it you received a loan for the spring quarter
only and you left school during the spring quarter, provide an amount to provide the total amount for both quarters.	or that quarter only. However,	if the loan was received for the wipter and spring quarters.
a. If your (or, for PLUS borrowers, the student's) last date of attendance	TOV YOURS RE	acted the removed of the schools
charges for the period of annoximent for which the loan was intended	. Include builtion, fees, and other	er school charges in the amount.* \$
6. If your (or, for PLUS borrowers, the student's) last date of attendance lederal grants and loans received for any part of the period of arrolled		
"If the unpaid retund is for more than one loan and the loans were into for each period of enrollment separately, using a separate sheet of pa	ended for different periods of a	inrollment, provide the amounts requested in Item 12a or 12b
13. Attach a copy of any documentation that supports your responses to its	ems 8 though 12. Examples of	documentation may include, but are not limited to, the
school's catalog, refund policy, tutton bill(s), enrollment contract, studi correspondence from the school that contains information about the re-	ent account statement, registra	tion forms, withdrawal form, attendance records, and any
SECTION 4: BORROWER CERTIFICATION	ISIN YOU DESCRIPTION OF	
My signature below certifies that -		
 Each loan for which I am requesting a discharge was received by me, in directly or applied as a credit to my (or, for PLUS borrowers, the student 		
. I (or, for PLUS borrowers, the student) did not attend the school or, within	n the timetrame that would enti	tie me to a refund, withdraw or was terminated from the school.
Except as identified in Section 2, Items 6 and 7, I have not received this I have read and agree to the terms and conditions that apply to this unp		
Under panalty of perjury, all of the information i have provided on this a		
knowledge and belief (b)(6)		x 8-1-03
Borrewer's Signature	Page 1 of 2	Date

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know that -

- If the achool is currently open, you may not apply for this type of discharge unless you have first contacted the achool and attempted to resolve the leave. If the lasse is not resolved, you may then apply for this type of discharge.
- W You may not apply for this type of discharge if you are currently ettending the school, if you (or, for PLUS borrowers, the student) are still attending the school, you should contact the school about the refund.
- If your school closed while you were enrolled (or if you withdraw from the school within 90 days before the school closed) and you did not complete your program of study at another school, you may wish to apply for a loan discharge based on the school's closure rather than a discharge based on the unpaid retund. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

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Return the completed term and any attachments to the address obsern in Section S.

SECTION 6: DEFINITIONS

- The Federal Fausity Education Lean (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ferd Federal Giract Lean (Direct Lean) Program includes Federal Direct Stafford/Ford Leans (Direct Subsidized Leans), Federal Direct Unsubsidized Stafford/Ford Leans (Direct Unsubsidized Leans), Federal Direct PLUS Leans (Direct PLUS Leans), and Federal Direct Consolidation Leans).
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- The student raters to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
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SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- It agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpeal or refund dispharpe.
- Il assign and transfer to the Department any right to recovery on the amount discharged that I may have from the action 2 of this form and/or any owners, affiliates or assigns of the action, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- I understand that this request may be denied, or my discharge may be revoked, if I fall to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- Si I understand that if my loan is discharged based on any false, fictitious, or fraudulent stataments that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable faderal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Motice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are 428(b)(2)(A) of seq. and 451 of seq. of the Higher Education Act of 1965, as emended (20 U.S.C. 1078(b)(2)(A) of seq. and 20 U.S.C. 1087a of seq.) and the authority for collecting and using your Social Security Number (SSN) is 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a learn (such as a determent, torbearance, discharge, or forgiveness) under the FFEL Program and/or Direct Loan Program, to permit the servicing of your iden(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) becomes delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information is your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer metching programs, to agencies that we authorize to assist as in administrating our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to aducational institutions, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms off the loan(s), to investigate possible traud and to verify compliance with tederal student instancial aid program regulations, to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide fearurises with tracking refunds and cancellations, or so provide a standardized method for educational institutions efficiently to suborit student employers takes.

In the event of Bigation, we may send records to the Department of Justice, a court, adjudicative body, operated, party, or witness if the disclosure is relevant and necessary to the Bigation. If this information, either alone or with other information, indicates a potential violation of law, we may send if to the appropriate authority for action. We may send information to members of Congress If you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grieveness, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we stay disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Redection Metics: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4851

If you have any comments or concerns regarding the status of your individual submission of this form, write directly to the address shown below.

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Roturn the completed loan discharge application and any attachments to: (If no address is sheers, return to your loan holder.)

If you need help completing this form, call: (If no phone number is chosen, sail your inen heldes)

To Whom It May Concern:

The intent of this note is to help clarify the events that took place during the aforementioned loan. It is my belief that careful consideration of this loan will help explain why this loan should be discharged.

Events:

- On 1/1988, I went to the Robert Fiance School to learn about a cosmetology course that they were offering.
- The school provided me with loan information, the amount of which I do not recall (it has been over 14 years). This loan amount covered the tuition, kit, and books.
- I attended the school for about three months (1/88 3/88). Towards the end of March 1988, I contacted the school to inform them that I would no longer be able to attend. I was informed that I would be charged for the kit and books as well as the months that I was in attendance. Although the total amount of these charges escapes me, I believe it was anywhere from \$500 to \$800.
- I never received any additional correspondence from the school until a couple of years later when the U.S. Dept. of Education billed me for approximately \$8,0000.
- Without researching this bill, I started to pay \$25 month, which over the period of time increased to \$50 and then \$100.
- After a couple of payments, due to financial hardships, I stopped paying this loan and this year, the proceeds of my tax returns were used to satisfy this loan.

I am unsure what to do since my research has led me to discover that the school is no longer in operation. Therefore, I have no one to talk to in an effort to discharge this loan amount. I don't mind paying for the time in which I attended the school, the books, and kit that I used, but there must be something I can do to avoid paying for a loan for that included services that I did not receive.

Please contact me at your earliest convenience to let me know what actions I can take.

Thank you.

Sincerely,



: : : :



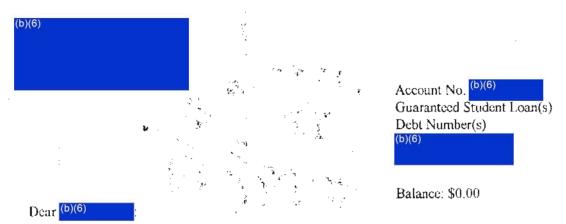


U.S. DEPARTMENT OF EDUCATION OFFICE OF POSTSECONDARY EDUCATION 50 UNITED NATIONS PLAZA – REGION IX SAN FRANCISCO, CA 94102–4987



January 21, 2004

SAN FRANCISCO SERVICE CENTER



This letter acknowledges receipt of the evidence you provided to support the objection raised that the balance owed on this debt is incorrect because you were due a full or partial refund from the school or lender.

The U.S. Department of Education has determined that you qualify for a full or partial unpaid tuition refund discharge of your Federal Family Education Loan(s) which you obtained to attend Robert Fiance Hair Design Institute, SID #007515.

As a result of this determination:

- you will be relieved of the obligation to repay the loan(s);
- o you will be refunded all moneys paid by you on the loan(s), which our records show to be \$4,486.86 refund is due, a check has been requested from the U.S. Treasury. Please allow 4-6 weeks for delivery;
- o you will no longer be regarded as in default on the loan(s) and the past reporting of a default will not preclude you from receiving assistance under the Title IV, Higher Education Act Programs in the future; and
- the Department will report the discharge to all credit reporting agencies to which it reports loan information so that the adverse credit history assigned to the loan(s) be deleted.

This covers only the Federal Family Educational Loan(s) held by the U.S. Department of Education, listed above, which was obtained to attend the above listed school(s). The Department has made no determination regarding loans which may be held by guaranty agencies, servicers, lenders, or educational institutions. If you believe that you may be eligible for discharge of other loans, you should contact the holder of those loans.

Loan Analyst
U. S. Department of Education

___01/12/04 12:01 FAX 404 562 6110

US DEPT OF ED. ASC

M005 6+65

(b)(6)



LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

CAME No. 1845-0058 Forth Approved Exp. Sale 11/31/2004

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prrespondence from the school that contains information about the reland		
CTION 4: BORROWER CERTIFICATION		
ciónature below certifies tisat —		
ach loan for which I am requesting a discharge was received by me, in win	ole cut in pourt, out our author Ji	assary 1, 1986. Trides ands were either received by me
heatly or applied as a credit to my (or, for PLUS borrowers, the students)	school account to pay the	amount awed to the school.
(or, for PLUS borrowers, the student) did not altend the sensel or, within the acept as identified in Section 2, Items 6 and 7, I have not received this rate	und, or any benefit of a reb	and in which I am emitted, from the actual or any thro party.
have read and sores to the terms and conditions that annie in this unnaid.	ල්කත් රික්ක්ෂණ ද ද න මෙන්	hed in Section 7 on the following page:
ador panal (D)(6)		nying documentation is true and accurate to the best of my
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over a Sq	1 of 2	Date 1 20 - 110



LOAN DISCHARGE APPLICATION: SCHOOL CLOSURE

DMB No. 1845-0015 Forus Approved Exp. Usis 06/30/2006

Fodoral Family Education Loan Program / William D. Food Fadoral Direct Loan Program / Federal Periods Loan Program

WARNING: Any person who knowingly makes a false statement or strangers entailed on this fore; or on any eccompletying documents will be subject to perable which may include final, imprisonment or both, under the U.S. Original Code and 20 U.S.C. 1087.

	under the U.S. Createst Code and 20 M.S.C. 1097.
ECTION 1: BORROWER IDENTIFICATION	
	Please the second the deliberation information. If a committee check UNS box.
	SSN (/b)/g)
	(b)(6)
	(b)(6)
	ψης, State, Δη(b)(6)
•	reieprone - Home
	Telaphona • Other
	E-mail address (optional)
ECTION 2: STUDENT INFORMATION	
fore responding, combilly read the entire form, including the in-	nstructions and other information on the following page. If you are a straight burrower applying for an information of the lines also became with them ?
Students name (but first middle inhists.	
Student's SSN: (b)(6)	will aughby bet lowneres as
Closed school's name: ROBERT France	
Date school closed (if known):	
Clased school's address (afreet, city, state, zip):	Moubory Det. Commence & Jay St.
Dates of attendance at the closed school: From -	1 - 1 To 1 - 1 Appro
Name of the program of study that you (or, for PLUS borrowers	the student) were enrolled in at the time the subset
Did you (or, for PLUS borrowers, the student) complete the proj	
M No, check all reasons that apply:	
The school closed while you (or, for PLUS borrowers, the stu	
You (or, for PLUS borrowers, the student) withdraw from the D You (or, for PLUS borrowers, the student) were on a approve	to better of abreece which the school closed:
from	
Brother (please explain): Withdrew	for School after () month, I needed a
TYPES DINO If Yes, skip flom 10 and answer froms 11 and	
☐ Yes ☑ No IT Yes, answer mems 11 and 12, 11 No, ship to	
the classed school, or by any other means? \[\subseteq \text{Yes} \text{No} \]	dam) credit for individe received at this closed action by allowing transfer of capality or house exceed at
OYS DNo	it the program of study over from the beginning at the estion school?
If yes, give the amount and explain why the money was refunde	
. Did you (or, for PLUS borrowers, the student) make any monet in connection with enrillment or attendance at the school: (a) Hanvaladdress/telephona number of the party with whom the	ary etalin with, or receive any payment from, the achool or any third party (see definition in Section 5) Yas Dino Dinor't Know If yes, please provide the following information: NO+ in Comments and a claim was made or from whom payment was received:
(b) Amount/status of claim:	(c) Amount of payment received: \$ (Write "none" if no payment was received.)
ECTION 3: BORROWER CERTIFICATION	
by signature below contribes that I have read and agree to the term index penalty of portury, I co (b)(6)	ne and consilitions that apply to this loss discharge, as specified in Section 6 on the following page.
	1000
ocrowan's Signature	1/3/07
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'LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Data 18/31/2064

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

			····					
SECTION 1: BORROWER IDENTIFICATION		and the delication interesting 15 to a section of						
MID: ANDCIE	this box.	ect the following information. If you make a c	CONTROLL CURCK					
$SD \cdot VV PO$	S\$N (b)(6)							
(b)(6)	(b)(6)							
Myster All	Name(b)(6	5)						
	Address	(b)(6)						
	City, State, Zip	(5)(6)	_					
	Telephone - Home							
	Telephone - Other	· · · · · · · · · · · · · · · · · · ·						
	E-mail (optional) _							
SECTION 2: LOAN AND SCHOOL INFORMATION								
Before responding, carefully read the entire form, including the instructions an for loan discharge, begin with item 3. If you are a parent borrower applying for a li-			rower applying					
Student's name (last, first, middle initial):		2. Student's (b)(6)						
3. Name and address (street, city, state, zip) of the school that you believe owes y	ou a retund:	4. Is this school still open? Yes IN	Don't Know					
Robert Ferance Beauty School		5. If this school closed, were you (or, for PL)						
Jerome Ave. Bronx NY		the student) attending when it closed?	☐ Yes ☐ No					
6. a. Do you have any other application for discharge, pending or approved, for a	· ·		☐ Yes ☐ No					
b. Has your school or any third party (see definition of "third party" in Section (you are requesting a discharge, or is any such payment being considered?		<u> </u>	☐ Yes ☐ No					
 If your answers to Items 6a and 6b are "No," proceed to Section 3. If your answ 7c for each discharge or payment, if known (use a separate sheet of paper if yo 			ems 72, 7b, and					
a. Reason for discharge or payment: b. From whom (include telephone num)			ed or anticipated:					
		<u> </u>						
SECTION 3: REFUND INFORMATION								
If you have documentation from the school showing the amount of the unpaid in	afrind attach a conv to	this form. If you some with the amount no	on to Section 4					
If you don't agree with the amount or you don't have this documentation, complete								
write "Dan't Know."								
What amount do you believe the school owes you?	8. What amount do you believe 9. Why do you believe the school owes you this amount?							
S SCHOOL OWES YOU?								
<u> </u>								
10. Your (or, for PLUS borrowers, the student's) first and last dates of attendance a		11. Your (or, for PLUS borrow						
		lever Attended program of study at the so	zhoot:					
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SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know that -

- III it the school is currently open, you may not apply for this type of discharge unless you have first contacted the school and attempted to resolve the issue is not resolved, you may then apply for this type of discharge.
- You may not apply for this type of discharge if you are currently attanding the school, if you (or, for PLUS borrowers, the student) are still attanding the school, you should contact the school about the refund.
- If your school closed while you were arrolled (or if you withdraw from the school within 90 days before the school closed) and you did not complete your program of study at another school, you may wish to apply for a loan discharge based on the school's closure rather than a discharge based on the unpaid refund. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using dark link. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2001" # "07-01-2001"). If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Items(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one achool, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 8.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- In The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endonser's obligation) to repay the portion of the loan that should have been retunded. Any accound interest and other charges associated with the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that accound the remaining balance of the loan after the discharge. The loan holder reports the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- The student raters to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Tains party refers to the holder of a performance bond, a State or other agency offering a taition recovery program, or any other entity that may reimburse you for a refund that you are owed.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an impaid retund discharge.
- I assign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loanis).
- 1 understand that this request may be decided, or my discharge may be revoked, if I tall to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- If I understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, i may be subject to civil and criminal penalties under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice: The Privacy Act of 1974 (5 U.S.C. 552a) regulars that the following notice be provided to you:

The authorities for collecting the requested information from and about you are 428(b)(2)(A) at seq. and 451 at seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) at seq. and 20 U.S.C. 1087a at seq.) and the authority for collecting and using your Social Security Number (SSN) is 484(a)(4) at the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and phyling us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your sligibility to receive a loss or a benefit on a loss (such as a determent, torbearance, discharge, or torpiveness) under the FFEL Program and/or Direct Loss Program, to permit the servicing of your loss(s) and, if it becomes necessary, to locate you and to collect on your loss(s) if your loss(s) becomes delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to educational institutions, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to conside you in repayment afforms, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enreliment status.

In the event of Ittigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the Itigation. It this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances knowlving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. It provided for by a collective bargaining agreement, we may disclose records to a tabor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Private Act safeguards.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a currently valid DMB control number. The valid DMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to raview instructions, search existing data resources, pather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this term, please write to: U.S. Daparment of Education, Washington, DC 20202-4651

If you have pay comments or concerns regarding the status of your individual automission of this form, write directly to the address shown below.

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Return the completed loan discherge application and any attachments to: (if so address is shown, return to your loan holder.)

If you need help completing this form, call: (If so phose number is shown, call your loan holder.)



LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

OMB No 1845-0058 Form Approved Exp. Data 10/31/2004

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include fines, impresonment or both, under the U.S. Chminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION		,)				
	Please enter or com this box: SSN (b)(6)	ect the following information. If you make a correc	tion, check				
Name (b)(6)							
	Address (b)(6)						
	City, State, Zip (b)(6	(b)(6)					
	Talaphone - Home (3					
	" Telephone - Other ()					
	E-mali (optional)						
SECTION 2: LOAN AND SCHOOL INFORMATION							
Balane rasponding, carefully read the entire form, including the instruction for loan discharge, begin with hem 3. If you are a parent borrower applying to	is and other information on or a PLUS loan discharge, b	the fallowing page. If you are a student borrower epin with Item 1	applying				
1. Student's name (last, first, middle initial (b)(6)		2 Students (b)(6)					
3 Name and address (street, city, state, zlp) or the sphoor that you believe on	os you a returid,	4 is this school still onen? I Yes Salvo I	Don't Know				
360 FRANKIN AVENUE BULLY	4 11238		rowers.was es 12 No				
6 a Do you have any other application for discharge, pending or approved, f			es _ Re No				
Has your school or any third party (see definition of "third party" in Section on a see requesting a discharge, or is any such payment being considere Hi your answers to items 6e and 6b are "No," proceed to Section 3 If your answers to items 6e and 6b are "No," proceed to Section 3.	d?	´ ` ` ` ` ´	as Ma				
To for each discharge or payment, if known (use a separate sheet of paper	answer to stem 64 or 60 is If you need to report more the	ves, provide the information requested in items /a	. 70, 200				
a Reason tordischarge er payment; b From whom Include telephone r	number) was the discharge of		anlicipated 3.00				
SECTION 3: REFUND INFORMATION							
If you have documentation from the school showing the amount of the uppa if you don't agree with the amount or you don't have this documentation, com write. "Don't Know."	ld refund, atlach a copy to i splete items 8 through 13 -11	this form II you agree with the amount, go on to S you don't know the response to an Item in this sec	echon 4. Von,				
8 What amount do you believe 9 Why do you believe the school on the school owes you?	~ ~ ~	The bos 2000 - left.	 6 36307				
10 Your (or, for P) US borrowers, the strategy's) first and last dates of alterior	oce at the schools.	11 Your (or, for PLUS barrowers, the program of study at the school	student's)				
12 This item requests the total amounts related to the period of enrollment for only and you left school during the spring quarter, provide an amount for the provide the total amount for both quarters.	nat quarier only. However, it is	the loan was received for the winter and spring qua	quarter rters.				
a If your (or, for PLUS borrowers, the student's) last date of attendance wa charges for the period of enrollment for which the loan was intended inc	tude tuillon, fees, and other	school charges in the amount " \$	ofe -				
b If your (or, for PAUS bornowers, the student's) last date of attendance was sederal grants and foans received for any part of the period of enrollment of the unpaid refund is for more than one loan and the loans were intended.	for which the loan was inten	ided	0x/e-				
for each period of enrollment separately, using a separate sheet of paper	lor your additional response	(5),					
13. Attach a copy of any documentation that supports your responses to items schools catalog, retund policy, tuition bill(s), enrollment contract, student a correspondence from the school that contains information about the refund.	coopel statement, registratio	n forms, withdrawal form, attendance records, and					
SECTION 4: BORROWER CERTIFICATION							
My signature below certifles that -							
 Each loan for which I am requesting a discharge was received by me, in who directly or applied as a credit to my (or, for PLUS borrowers, the student's) s I (or, for PLUS borrowers, the student) did not attend the school or, within the 	school account to pay the arr	nount oward to the school					
Except as identified in Section 2, Items 6 and 7, I have not received this refut	nd, or any benefit of a refund	I to which I am entitled, from the School or any thin	d party				
 I have read and agree to the terms and conditions that apply to this unpaid to Under penalty of performation i have provided on this applic knowledge and belief (b)(6) 			of my				
	age 10:2	Date APTILO X	204				

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know that -

- If the school is currently open, you may not apply for this type of discharge unless you have first contacted the school and attempted to resolve the issue, it the issue is not resolved, you may then apply for this type of discharge.
- W You may not apply for this type of discharge if you are currently attending the school. If you (or, for PLUS borrowers, the student) are still attending the school, you should contact the school about the refund.
- If your school closed while you were enrolled (or if you withdrew from the school within 80 days before the school closed) and you did not complete your program of about which type of loan discharge is most appropriate for you, contact your foan holder at the address shown in Section 8.

When completing this form, type or print using dark ink. For all dates, the month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "Suly 01, 2001" = "07-01-2001"), if you need more space to answer any of the items, continue on separate sheets of paper and attach them to this form, indicate the number of the items(s) you are answering and include your pame and social security number (SSN) on all attached pages. If a refund is towed for more than one student or from more than one school use separate forms for each student or school.

Return the completed form and any attachments to the address ahown in Section 9.

SECTION 6: DEFINITIONS

- 🖪 This Faderal Family Education Loan (FFEL) Program includes Faderal Statford Loans (both subclidized and unsubclidized), Faderal Supplemental Loans for Students (SLS), Federal PLUS Leans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program Includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stationary or Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct PLUS Loans)
- in the first state of the loan impald mind canosis your obligation (and any endorser's obligation) to repay the portion of the loan that should have been solurised. Any accrued interest and other charges spreading with the unusid rotand will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. The loan holder reports the discharge to all credit reporting agencies to which the loan holder previously reported the
- The student refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Third party refers to the heider of a performance bond, a State or other agency offering a tultion recovery program, or any other onlify that may reimburge you for a refund that you are owed.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON UNPAID REFUND

- agree to opposite with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for
- i assign and transfer to the Department any right to recovery on the amount discharged that I may have from the actions of the section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the
- 🗷) understand that this request may be defiled, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- | understand that if my loan to discharged based on any false, fictilious, or fraudulent statements that I knowlingly made on this form or on any accompanying documents. I may be subject to sivil and criminal penalties under applicable federal law.

SECTION 6: IMPORTANT NOTICES

Privacy Act Hollen: The Privacy Act of 1974 (5 U.S.C. 552n) requires that the tokowing nauce be provided to you:

Frivacy Act Holles: The Privacy Act of 1974 (b. U.S.C. 552a) requires that the following nature be provided to you:

The subnities for collecting the requested information from and about you are 428(b)(2)(A) et seq. and 451 et seq. of the Higher Education Act of 1965, ac amonded (20 U.S.C. 1078(b)(2)(A) et seq and 20 U.S.C. 1087a et seq.) and the subnitity for objecting and using your Social Security Number (SSN) is 464(a)(4) of the HEA (20 U.S.C. 1081(a)(4)). Perilopating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a determent, forbearance, discharge, or forgiveness) under the FFEL Program entitor Direct Loan Program, to permit the servicing of your boan(c), and, if it becomes necessary, to locate you and to collect on your loan(s) it your loan(s) becomes delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your rite may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to televial, state, or local agencies, to other federal aparties under computer matching personant, to agencies that we authorize to assist us in administrating our loon programs, to private parties such as relatives, present and former amployers, business and personal associates, to credit bureau opportunitions, to educational institutions, and to contractor in order to verify your ideality, to retermine your stipplish to receive a loan or a benefit on a loan, to permit the servicing or collection of your loants, to counsel you in recognized entires the terms of the loants), to investigate possible fraud and to verify compliance with federal student financial aid program repulsitions, to incate you if you become definquent in your loan payments or if you default, not calculations, for provide financial aid history information, to assist program administrators with tracking related and cancellations, or to provide a standardized method for educational institutions efficiently to submit student encollement states. The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information subroll student enrollment status.

In the event of illigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of kay, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, prievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71, Disclosures may also be made to quelified researchers under Privacy Act safeguards.

Paperwork Reduction Holice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid DMB control number for this information collection is 1846-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. It you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this term, please write to 18.5. Department of Education, Washington, DC 20202-4651

If you have any comments or concerns regarding the status of your individual automission of this form, write directly to the address shown below.

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Return the completed town discharge application and any attachments to (Il no address is shown, return to your loan holder.)

If you need help completing this form, call: (If no phone number is shown, call your jobn holder.) No action required - UNP approving 5/14/04



LOAN DISCHARGE APPLICATION: UNAUTHORIZED SIGNATURE/UNAUTHORIZED PAYMENT

OM8 No. 1845-0015 Form Approved Exp. Date 06/30/2065

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or un any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

which may include fines, imprisonment or both, under the U.	S. Criminal Code and 20 U.S.C. 1097.
SECTION 1: BORROWER IDENTIFICATION	
	Please enter or correct the following information. It a correction, check this box: SSN (b)(6) Name (b)(6)
	Address (b)(6)
	City, State, Zip (b)(6)
•	Telephone - Homa
	Telephone - Other
	E-mail address (optional)
SECTION 2: STUDENT INFORMATION	77
loan discharge, begin with item 3. If you are 3. Second horsewer applying for	and other information on the following page. If you are a student borrower applying for a professional page, begin with Hem 1.
Student's name (last first middle initial): (b)(6)	
 Student's SSN: (b)(6) School's name: WTLFRED_SCHOLI. = ROBERT_FT 	ANOD HATE CHOTON INCOTONING
4. School's address (street, city, state, zip): 2450 GRAND CON-	
5. Dates of attendance at the school: From - -	
5. Did you sign the application, promissory note, master promissory note (M	PN), or combined application/promissory note for your loan(s)? Yes No cation Promissory note MPN Combined application/promissory note
If No, did you (or, for PLUS borrowers, the student) ever receive any mone PLUS borrowers, the student) owed to the school? Yes DKNo D (check
I DID SIGN APLICATION, BUT 2 DAY	YS AGO I WENT TO CANCELLED AND THEY
If No or Don't Know, explain how you (or, for PLUS borrowers, the student	TOLD ME, OK, I) paid the fullion and lees owed to the school: PARY SAID THAT I DON'T HAVE TO DO ANYTHING
8. If you answered No to lem 6 or Item 7, do you know who signed your name on the School employee or representative (name and position): Other person (name):	ne on the document(s) checked in Item 6 or 7? ELSE edocument(s).
Provide any other information about the circumstances under which anoth	er berson sinced your game.
no	
IMPORTANT: If you did not sign your name on one of the documents listed in signature in addition to the signature on this application. At least two of these after the date of the document on which someone else signed your name. Exceeding the signature was written include—but are not limited to—cancelled checks, tax be considered for a loan discharge.	Item 6 or Item 7, you must attach documents containing four other samples of your samples must clearly show that your signatures were written within one year before or amples of documents that would include both a signature sample and the date that the returns, and driver's licenses. If you do not provide these signature samples, you cannot
Did the holder of your loan receive any money back (a refund) from the so If Yes, give the amount and explain why the money was refunded:	hool on your behalf? ☐ Yes ☐ No ☐XDon't Know
in connection with enrollment or attendance at the school: (a) Name/address/telephone number of the party with whom the claim was	with, or receive any payment from, the school or any third party (see definition in Section 5) o Don't Know If yes, please provide the following information: s made or from whom payment was received:
N/A	
(b) Amount/status of claim: N/A	(c) Amount of payment received: \$ N/A (Write "none" if no payment was received.)
SECTION 3: BORROWER CERTIFICATION	
My signature below certifies that I have read and agree to the terms and condition under penalty of perjury. It testifies that will the time information in house must when our knowledge and belief. (b)(6)	itions that apply to this toan discharge, as specified in Section 6 on the following page.
Porrower's Signature:	Date: 03-29-2004

SECTION 4: INSTRUCTIONS FOR COMPLETING THE FORM

Type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "January 31, 2002" = "01-31-2002"). If you need more space to answer any of the items, continue on separate sheets of paper and attach them to this form. Indicate the number of the item(s) you are answering and include your name and social security number (SSN) on all attached pages.

Send the completed form and any attachments to the address in Section 8.

SECTION 5: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Statford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- The holder of a borrower's FFEL Program loan(s) may be a lender, a guaranty agency, or the U.S. Department of Education (the Department). The holder of a borrower's Direct Loan Program loan(s) is the Department.
- Unauthorized signature means that the school, without the borrower's authorization, signed the borrower's name on a loan application or promissory note.
- Unauthorized payment means that the school, without the borrower's authorization, endorsed the borrower's ioan check or signed the borrower's authorization for electronic funds transfer or master check, and did not give the loan proceeds to the borrower or apply the loan proceeds to charges owed by the student to the school.
- Loan discharge due to an unauthorized signature on a loan application or promissory note cancels the obligation of a borrower (and endorser, if applicable) to repay the remaining balance on a FFEL Program or Direct Loan Program loan, and qualifies the borrower for reimbursement of any amounts paid voluntarily or through forced collection on the loan. Discharge due to an unauthorized signature on a loan check, electronic funds transfer authorization, or master check authorization applies only to the amount of the unauthorized payment. For consolidation loans, only the loan amounts associated with the document fisted in Section 2, Item 6 or Item 7, will be considered for discharge. The loan holder reports the discharge to all credit reporting agencies to which the holder praviously reported the status of the loan.
- The student reters to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a tuition recovery program or performance bond

SECTION 6: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- The school identified in Section 2 of this form received FFEL Program or Direct Loan Program loan funds on or after January 1, 1986, for me to attend (or, if Lam a PLUS borrower, for the student to attend) the school. I am applying for a discharge of my FFEL Program or Direct Loan Program loan(s) because the loan application, promissory note, master promissory note, combined application/promissory note, loan disbursement check, electronic funds transfer authorization, or master check authorization were not authorized for the reasons stated in this application.
- I will provide, upon request, testimony, a gworn statement, or other documentation reasonably available to me that demonstrates to the satisfaction of the Department or its designee that I meet the qualifications for loan discharge based on unauthorized signatura/unauthorized payment, or that supports any representation that I made on this form or on any accompanying documents.
- I agree to deoperate with the Department or its designee regarding any enforcement actions related to my request for loan discharge.
- 1 understand that my request for foan discharge may be denied, or my discharge may be revoked, if ! fail to provide testimony, a sworn statement, or documentation upon request, or if I provide testimony, a sworn statement, or documentation that does not support the material representations. I have made on this form or on any accompanying documents.
- I further understand that it my loan(s) is discharged based on any false, lictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, it may be subject to civil and criminal penalties under applicable federal law.
- I hereby assign and transfer to the Department any right to a refund on the discharged loan(s) that I may have from the school identified in Section 2 of this form and/or any cwiners, affiliates, or assigns of the school, and from any third party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).

SECTION 7: IMPORTANT NOTICES

Privacy Act Notice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are \$428(b)(2)(A) et seq. and \$451 et seq. at the Higher Education Act of 1965, as amended (20 U.S.C. 108(b)(2)(a) et seq. and 20 U.S.C. 1087a et seq.) and the authority for collecting and using your Social Security Number (SSN) is \$484(a)(4) of the HEA (20 U.S.C. 1091(a)(4). Participating in the Federal Family Education Loan (FFEL) Program or the William B. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the reguested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a foan or a benefit on a loan (such as a determent, forbearance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to educational institutions, and to contactors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan to permit the servicing or collection of your loan(s), to counset you in repayments, to enforce the terms of the loan(s), to investigate possible travol and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with lederal stucent aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act sateguards.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0015. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, galher and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4551

If you have questions regarding the status of your individual submission of this form, contact your loan holder (see Section 8).

SECTION 8: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to:

(if no address is shown, return to your loan holder.)

If you need help completing this form, call:





We Help Put America Through School

March 19, 2004

(b)(6)

Debt No.:

Account No.:

Dcar (b)(6)

Thank you for your recent correspondence concerning your student loan account with the U.S. Department of Education (ED).

You state that you did not receive the loan that ED holds in your name. Our records indicate that in 1988, you received a loan made under the Federal Family Education Loan Program in the amount of \$4,000.00 to attend Robert Fiance Hair Design Institute. The loan was later declared in default, and the Higher Education Assistance Foundation (HEAF), the guaranty agency, paid an insurance claim to the lender. HEAF subsequently assigned the account to ED. The loan entered our database on May 21, 1993.

Federal regulations 34 C.F.R. 682.402(e) provide the authority for discharging a borrower's loan if the school used his or her signature without authorization on a loan application, promissory note, loan disbursement check, or electronic funds transfer.

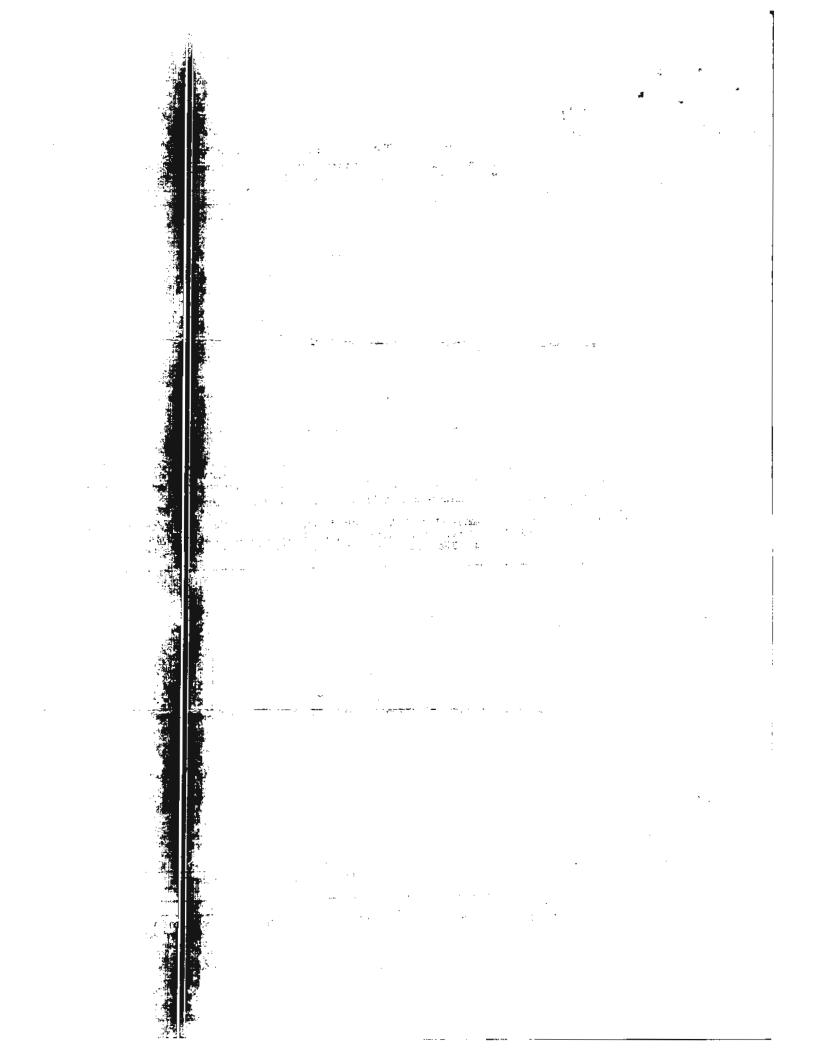
A borrower is not eligible for loan discharge if it is determined that he or she materially benefited from the proceeds of the loan. A borrower is considered to have materially benefited from the proceeds of a loan if he or she attended the school for the period of the loan and incurred a tuition liability that was paid in whole or in part by the loan proceeds.

If you believe you qualify for loan discharge because of a forged signature, you must submit the enclosed "Loan Discharge Application: Unauthorized Signature/Unauthorized Payment." The application includes instructions for its completion.

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830 First Street, NE, Washington, D.C. 20202 1-800-4-FED-AID www.studentaid ed.gov



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LOAN DISCHARGE APPLICATION: UNPAID REFUND

DMB No. 1845-0058 Form Approved Exp. Data 10/31/2004

Federal Family Education Loan Program/William D. Ford Federal Direct Loan Program

WARNING: Any person who knowingly makes a talse statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include fines, impresentent or both, under the U.S. Criminal Code and 20 U.S.C. 1997.

SECTION 1: BORROWER IDENTIFICATION		
SECTION 2: LOAN AND SCHOOL INFORMAT	this bay (b)(6) SSN (b)(6) Name Address (b)(6) City, State, Zip Telephone - Home (talephone - Other E-mail (optional) TION utiling the instructions and other information on	ine following page. If you are a student borrower applying
1. Sturiotic (b)(6)	импинат вругуну тог в гело кап импинуе, во	2. Student's (b)(6)
3 Name and address (street, city, state, zip) of the school		4 is this school still open? Yes No Dan't Know If this school closed, were you (or, for PLUS borrowers,was
Robert Flance. 2435 Grand		the student) attending when it closed? Yes No
 a. Do you have any other application for discharge, p. b. Has your school or any third party (see definition o you are requesting a discharge, or is any such payr 	"third party" in Section 6, on the following page	
		Yes," provide the information requested in items 7a, 7b, and han one discharge or payment).
	(include telephone number) was the discharge of	
SECTION 3: REFUND INFORMATION		
If you have documentation from the school showing the If you don't agree with the amount or you don't have this write "Don't Know"	amount of the unpeld refund, aftech a copy to documentation, complete items 8 through 13. If	this form. If you agree with the amount, go on to Section 4. you don't know the response to an item in this section,
E What amount do you believe 9. Why do you the school owes you?	believe the school owes you this amount?	I week dismissed and now the School
10. Your (or, for PLUS borrowers, the student's) first and	last dates of attendance at the school.	11. Your (or, for PLUS borrowers, the student's)
12 This item requests the total amounts related to the pa only and you left school during the spring quarter, pro provide the total amount for both quarters	riod of enrollment for which the toan was intende wide an amount for that quarter only. However, H	d. For example, if you received a loan for the spring quarter the loan was received for the winter and spring quarters.
a If your (or, for PLUS borrowers, the student's) last charges for the period of enrollment for which the li	oan was intended, include fullion, fees, and other	school charges in the amount." \$
 b. If your (or, for PLUS borrowers, the student's) last federal grants and loans received for any part of the 	period of enrollment for which the loan was inter	nded * \$
If the unpaid refund is for more than one loan and t for each period of enrollment separately, using a se	he loans-were intended for different periods of en parato sheet of paper for your additional response	rollment, provide the armounts requested in Item 12a or 12b
13. Attach a copy of any documentation that supports you school's catalog, refund policy, tuition bill(s), enrolling correspondence from the school that contains information.	nt contract, student account statement, registrati	on forms, withdrawal form, attendance records, and any
SECTION 4: BORROWER CERTIFICATION		
My signature below certifies that —	sacked by me in whale as Is and an arrather in	numeral 1000 Those founds were althre renegred by me
 Each lean for which I am requesting a discharge was redirectly or applied as a credit to my (or, for PLUS borrown). 	owers, the students) school account to pay the ar	mount owed to the school
		me to a refund, withdrew or was terminated from the school and to which I am entitled, from the school or any third party.
- I have read and agree to the terms and conditions that	apply to this unpaid refund discharge, as specifie	d in Section 7 on the following page
Under penalty (b)(6) knowledge ar	rovided on this application and in any accompany	ring documentation is true and accurate to the best of my
Borrower's Sign	Page 1 of 2	Date

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know that -

- if the school is currently open, you may not apply for this type of discharge unless you have first contacted the school and attempted to resolve the issue. If the issue is not resolved, you may then apply for this type of discharge.
- You may not apply for this type of discharge if you are currently attending the school, if you (or, for PLUS borrowers, the student) are still attending the school, you should contact the school about the refund.
- If your school closed while you were enrolled (or if you withdraw from the school within 90 days before the school closed) and you did not complete your program of study at another school, you may wish to apply for a loan discharge based on the achoel's closure rather than a discharge based on the unpaid refund, if you are unputs about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Socilon 9.

When completing this form, type or print using dark link. For all dates, the month, day (if known), and year, Show dates as MM-DD-YYYY (for example, "Joby 01, 2001" = "07-01-2001"). If you need more space to encour any of the Items, continue on separate abacts of paper and attach them to this form. Indicate the number of the Items, continue on separate abacts of paper and attach them to this form. Indicate the number of the Items, one answering and include your name and social security number (SSN) on all attached pages. If a refund is awad for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program Includes Federal Stations (both subsidized and unsubaidized), Federal Supplemental Loans for Students (SLS) Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Fard Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Stabsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of the loan that should have been refunded. Any accrued interest and other charges associated with the unpaid refund will also be discharged, and you will be relimbursed for any amount that you have repaid that exceeds the remaining belonce of the loan after the discharge. The loan holder reports the discharge to all credit importing agencies to which the loan holder previously reported the status of the loan.
- The student refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Coan.
- Whird party refers to the holder of a performance bond, a State or other agency offering a juition recovery program, or any other entity that may reimburse you for a refund that you are owed.

BECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHANGE BASED ON UNPAID REFUND

- is agree to cooperate with the U.S. Department of Education (the Department) or the Department's designed in any enforcement action related to this application and to provide to the Department or the Department's designed, upon request, other documentation reasonably available to me that demonstrates that i meet the qualifications for an unpaid retund discharge.
- i earlyn and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a retund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- I understand that this request may be defield, or my discharge may be revoked, if I fall to cooperate, provide documentation, or meet any of the other terms of my acrosmont on this form.
- 1 understand that if my loan is discharged based on any false, fictillous, or freedulent statements that I knowingly mode on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable (adera) law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Holice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are 428(b)(2)(A) et seq. and 451 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) et seq. and 20 U.S.C. 1087a et seq.) and the authority or collecting and using your Social Security Number (SSN) is 484(a)(4) of the HEA (20 U.S.C. 1081(a)(4)), Participating in the Foderal Family Education Loss (FFEL) Program or the William D. Ford Foderal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a team or a benefit on a loan (such as a determent, fortestance, discharge, or fergiveness) under the FFEL Program and/or Direct Loan Program, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) becomes delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third portise as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, stats, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administrating our inam programs, to private parties such as relatives, present and former temployers, business and personal associates, to credit buteau expanisations, to educational institutions, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to coursely you in repayment offerts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial sid program regulations, to locate you if you become definquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking returns and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of dustice, a court, adjunicative body, coursel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either slope or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send in factor of congress if you cak them to help you with foderal student aid questions. In circumstances involving employment complaints, privances, or disciplingly softens, we may disclose relevant records to adjudicate or investigate the issues, if provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.G. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act saleguards.

Paperwork Reduction Holics: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number to this information collection is 1845-0058. The time required to complete this information collection is estimated to sverage 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete with information collection. If you have any comments concerning the securacy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651

If you have any comments or concerns reporting the status of your individual automicates of this form, write directly to the address shown below.

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Return the completed loan discharge application and any attachments to: (if no address is shown, return to your loan holder.)

if you need help complating this form, call; (If no phone number is shown, call your loan holder.)



U.S. DEPARTMENT OF EDUCATION OFFICE OF POSTSECONDARY EDUCATION 50 UNITED NATIONS PLAZA - REGION IX SAN FRANCISCO, CA 94102-4987

COPY

March 21, 2005 Sent 15 H

SAN FRANCISCO SERVICE CENTER



Account No. (b)(6)

Guaranteed Student Loan(s)

Debt Number(s)
(b)(6)

Balance: \$0.00

Dear (b)(6)

This letter acknowledges receipt of the evidence you provided to support the objection raised that the balance owed on this debt is incorrect because you were due a full or partial refund from the school or lender.

The U.S. Department of Education has determined that you qualify for a full or partial unpaid tuition refund discharge of your Federal Family Education Loan(s) which you obtained to attend Robert Fiance, S1D#007515.

As a result of this determination:

- you will be relieved of the obligation to repay the loan(s);
- o you will be refunded all moneys paid by you on the loan(s), which our records show to be \$0.00 refund is due, a check has been requested from the U.S. Treasury (if a refund is due). Please allow 4-6 weeks for delivery;
- o you will no longer be regarded as in default on the loan(s) and the past reporting of a default will not preclude you from receiving assistance under the Title IV, Higher Education Act Programs in the future; and
- the Department will report the discharge to all credit reporting agencies to which it reports loan information so that the adverse credit history assigned to the loan(s) be deleted

This covers only the Federal Family Educational Loan(s) held by the U.S. Department of Education, listed above, which was obtained to attend the above listed school(s). The Department has made no determination regarding loans which may be held by guaranty agencies, servicers, lenders, or educational institutions. If you believe that you may be eligible for discharge of other loans, you should contact the holder of those loans.

Sincerely,

James S. Farrar Senior Loan Analyst U. S. Department of Education

007515 UNPAID REFUND





LOAN DISCHARGE APPLICATION: FALSE CERTIFICATION (DISQUALIFYING STATUS)

OMB No. 1845-0015 Form Approved Exp. Date 05/39/2005

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

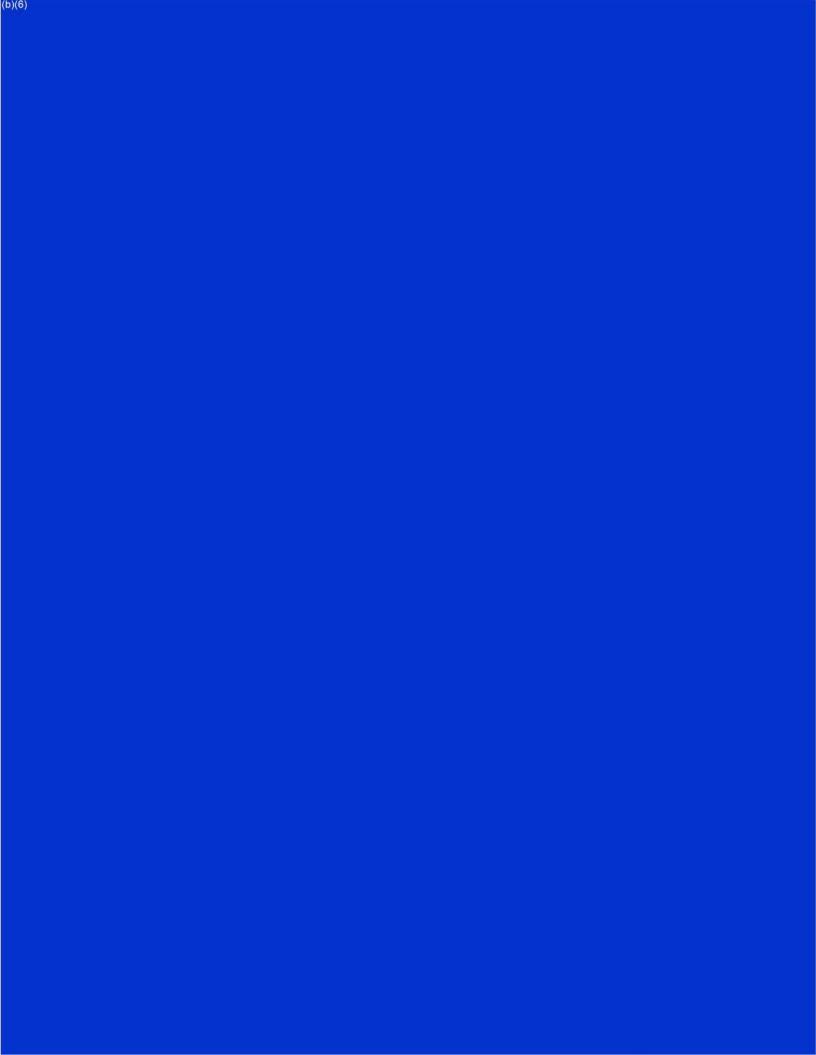
WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties

SEC	CTION 1: BORROWER IDENTIFICATION	
		Please entry or correct the following information, if a correction, check this box D SSN (b)(6) Name (b)(6) Address (b)(6) (b)(6)
b	ert Fiance NSCOS	City, State, Zip(b)(6) Telephone - Home (Telephone - Other (E-mail address (optional)
·E	CTION 2: STUDENT INFORMATION	E-mail address (Optional)
elo	are responding, carefully read the entire form, including the instr	uctions and other information on the following page. If you are a student borrower applying for
025	discharge, begin with flem 3. If you are a narent horrower annu	ins for a Pi US loan discharce, begin with item 1.
	Student's name trast hirst, initidia inmain:	000
	Student's SSN: School's name: Robert FIRMS	Ponce, PR of
		New York
	School's address (street, city, state, zip):	
		To 0 15 - 3 0 - 17 8 18 estimates the loan that you are requesting
	to have discharged: Come to key with	Briter 644
	time the school certified or originated your loan - to meet the legal	disqualifying status, you (or, for PLUS borrowers, the student) must have been unable — at the requirements for employment in your state of residence (or, for PLUS borrowers, in the student's y was intended because of age, a physical or mental condition, criminal record, or other reason. es) below:
	☐ Age ②.Physical condition	record
	loan. Also, provide as much information as possible about the state meet. Include the title and/or section number of the specific state is	perowers, the student) had the disqualifying status at the time the school certified or originated your legal requirements for employment that you (or, for PLUS borrowers, the student) could not now or regulation, or attach a copy of the law or regulation. You may obtain this information from a or department of labor and employment, from a public library, or from an internet site that
8.	loan. Also, provide as much information as possible about the state meet. Include the title and/or section number of the specific state is the appropriate state agency, such as the consumer protection offic contains state laws and regulations. (a) Before certifying or originating the loan, did the school ask you I Yes I Don't Know (b) Did you (or, for PLUS borrowers, the student) inform the school	legal requirements for employment that you (or, for PLUS borrowers, the student) could not be or regulation, or attach a copy of the law or regulation. You may obtain this information from
8.	loan. Also, provide as much information as possible about the state meet. Include the title and/or section number of the specific state is the appropriate state agency, such as the consumer protection offic contains state laws and regulations. (a) Before certifying or originating the loan, did the school ask you I Yes I Don't Know	legal requirements for employment that you (or, for PLUS borrowers, the student) could not aw or regulation, or attach a copy of the law or regulation. You may obtain this information from a or department of labor and employment, from a public library, or from an internet site that (or, for PLUS borrowers, the student) if the disqualifying status explained in Item 7 existed?
8.	loan. Also, provide as much information as possible about the state meet. Include the title and/or section number of the specific state is the appropriate state agency, such as the consumer protection offic contains state laws and regulations. (a) Before certifying or originating the loan, did the school ask you (a) Yes (b) No (c) Don't Know (b) Did you (or, for PLUS borrowers, the student) inform the school Yes (a) No (c) Did the holder of your loan receive any money back (a refund) from it Yes, give the amount and explain why the money was refunded. Did you (or, for PLUS borrowers, the student) make any monetary	legal requirements for employment that you (or, for PLUS borrowers, the student) could not not or regulation, or attach a copy of the law or regulation. You may obtain this information from a or department of labor and employment, from a public library, or from an internet site that (or, for PLUS borrowers, the student) if the disqualifying status explained in Item 7 existed? If of the disqualifying status before the loan was certified or originated? In the school on your behalf? Yes No Don't Know If yes, please provide the following information:
8.	loan. Also, provide as much information as possible about the state meet. Include the title and/or section number of the specific state is the appropriate state agency, such as the consumer protection offic contains state laws and regulations. (a) Before certifying or originating the loan, did the school ask you Yes	Regal requirements for employment that you (or, for PLUS borrowers, the student) could not aw or regulation, or attach a copy of the law or regulation. You may obtain this information from a or department of labor and employment, from a public library, or from an internet site that [or, for PLUS borrowers, the student) if the disqualifying status explained in Item 7 existed? If of the disqualifying status before the loan was certified or originated? If the school on your behalf? Yes No Don't Know It yes, please provide the following information: alm was made or from whom payment was received:
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8. 9. 10.	loan. Also, provide as much information as possible about the state meet. Include the title and/or section number of the specific state is the appropriate state agency, such as the consumer protection offic contains state laws and regulations. (a) Before certifying or originating the loan, did the school ask you	Regal requirements for employment that you (or, for PLUS borrowers, the student) could not aw or regulation, or attach a copy of the law or regulation. You may obtain this information from a or department of labor and employment, from a public library, or from an internet site that (or, for PLUS borrowers, the student) if the disqualifying status explained in Item 7 existed? (or, for PLUS borrowers, the student) if the disqualifying status explained in Item 7 existed? (or the disqualifying status before the loan was certified or originated? In the school on your behalf? Yes No Don't Know It pon't Know It yes, please provide the following information: alim was made or from whom payment was received: (c) Amount of payment received: \$ (Write "none" If no payment was received.) In the school of the following page, and conditions that apply to this loan discharge, as specified in Section 6 on the following page, and on this form and in any accompanying documentation is true and accurate to the best of my
8. 9. 10.	loan. Also, provide as much information as possible about the state meet. Include the title and/or section number of the specific state is the appropriate state agency, such as the consumer protection offic contains state laws and regulations. (a) Before certifying or originating the loan, did the school ask you	we or regulation, or attach a copy of the law or regulation. You may obtain this information from a or department of labor and employment, from a public library, or from an internet site that (or, for PLUS borrowers, the student) if the disqualifying status explained in Item 7 existed? If of the disqualifying status before the loan was certified or originated? If the school on your behalf? Yes No Don't Know It yes, please provide the following information: alim was made or from whom payment was received: (c) Amount of payment received: \$

Qn,

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Jan	vary 23, 2005	
	At whom make concern:	
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(b)(6)	where I had received my treatment. Also	,
Ima de (6)(6)	several phone call inquiry for my records at	
to se	and by this time they not been all and any information to me.	
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finisk.	of the program rehab in the (b)(6) for the local (b)(6)	
by th	is time they just tell me, that my record is metive files and going to take some time to fin	s
them	2	
The	tury I respectfully solarting for additional time to	
jet f	twhy I respectfully solveiting for additional time to e evidence you ask for Thank you for the 1555 times then to son this matter, bod bloss you.	<u></u>
and a	Respectfly	

ji.



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Borrower's SSN:			g ************************************	GARNISHMEN* 9	15.00%						<u> </u>
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	\$637.50	\$0.00	\$0.00		Bupples, Appeal and Services, Personal Care			Į.	\$0.00	\$0.00	\$0.00
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State Taxes	£46.33	60.00	***		Housing & Dillities	41.11					
orate taxas	\$16.33	\$0.00	\$0.00]	Standards	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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FICA	\$39.53	\$0.00	\$0.00		Rent and Utilities		\$411.00	\$411.00]
Medicare	\$9.24	\$0.00	\$0.00		Transportation		\$100.00	\$100.00		Ì	
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#NCOME \$1,275.00 \$0.00 \$0.00 \$0.00 INCOME (amount containing after expenses) \$576.04 is used in expenses						i——					
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see to the second			Financial		culation Workshe	et					
Borrewer's Name:	b)(6)	((SPE)(H). SV		GARN SHMENT 9	timination in the contract of						n
Borrower's SSN:	2//2/			GAR V. SITING Y 1 3	15.00%						—.
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Par Illineiro	Also de Alfred	grage The Cit				State	5)(0)				
	in the second	415-355 33-331	e in a considerability of the	N. F. Jer. 机线点分割 电容		3.811		(\$4. %的) (\$4. 17.11).			_
Borrower Pald: Monthly (M) Blavaskiv (BW	ft Waakku IWA F	Manthh (BM)	вм		County	0		MISC	H/Ų	TRANS .
Spouse Paid: Monthly (M				M				grown by the state of the state	\$315.00	\$0.00	\$0.00
Additional Paid: Monthly				BW		Number in Family Number of Cars	(D)(O)		\$152.00	\$0.00	\$0.00
18.7					壁 腰頭 医海绵	in the second	. Commence de la compaña d		\$0.00	\$0.00-	\$U.UU -:
INCOME			-		EVERNORO	Chandred Augliophia	Annual Planted	Account Accounts d		\$0.00	****
INCOME	SettoMet	Spouse	Other	Family Totals	EXPENSES	Standard Applicable	Amount Stated	Amoun! Accepted	\$0.00	\$0.00	\$0.00
GROSS PAY	\$637.50	60.00	20.00		Hood, Housakeeping			İ	#0.00	6 0.00	60.00
		\$0.00	\$0.00		Supplies, Apparei and Services, Personal Care	l l		****	\$0.00	\$0.00	\$0.00
Federai Taxes	\$0.00	\$0.00	\$0.00		Products, and Miscallaneous Housing & Utilities	\$942.00	\$467.00	\$942.00	\$0.00	\$0.00	\$0.00
State Taxes	\$16.33	\$0.00	\$0.00		Standards	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<u> </u>	V		77.77	÷ .	Transportation	- +		******	40.00		
Local/City Taxes	\$0.00	\$0.00	\$0.00	.4 -	Standards	#N/A	\$0.00	#N/A	\$467.00	\$0.00	\$0.00
FICA	\$39.53	\$0.00	\$0.00		Rent and Utilities		\$411.00	\$411.00			
Medicare	\$9.24	\$0.00	\$0.00		Transportation		\$100.00	\$100.00			
UFALTH BIGUELLES	422.40	***	***				***	40.00	,	nousing	
HEALTH INSURANCE	\$28.88	\$0.00	\$0.00		0	<u>tiba ji wa i</u>	\$0.00	\$0.00		differential	\$0.00
		****	44.44	: .	n 📑	1.14	22.00			revised stated	ı
0	\$0.00	\$0.00	\$0.00		0	933	\$0.00	\$0.00		expenses*	\$978.00
0	\$0.00	\$0.00	\$0.00		0	2 A A 2	\$0.00	\$0.00			<u> </u>
0	\$0.00	\$0.00	\$0.00		0.11		\$0.00	\$0.00			
monthly income adjustment (prior	i '									Misc	
garnishment)	\$0.00	\$0.00	\$0.00		o at 5 b	. Addition	\$0.00	\$0.00		Expenses	\$511.00
			<u> </u>		1912					Misc Exp	
Total Deductions per Pay		1	19.44	: # ^{ip}	Lag diring		·			minus	1
Period	\$93.98	\$0.00	\$0.00	''	a ' "		\$0.00	\$0.00		housing diff*	\$511.00
		- 4		<u> </u>						T	
TOTAL MONTHLY	1			ADDITIONAL FAMILY		the of the				discrincome	
DEDUCTIONS	\$187.96	\$0.00	\$0.00	MONTHLY INCOME	TOTAL MONTH	ILY EXPENSES	\$978,00	\$511.00		: minus gar	\$412.98
MONTHLY GROSS INCOME						DISCRETIONARY		4570.04		sing differential	:
	\$1,275.00	\$0.00	\$0.00	\$0.00	INCOME (amount rem	alning after expenses)		\$576.04	is used ii	п ехрепьев	ļ
MONTHLY DISPOSABLE INCOME (A)	1		****	#4 007 04							
0.916410180110101	\$1,087.04	\$0.00	\$0.00	\$1,087.04							ļ
FOURES ABOVE FOR BO	PRICHER ONLY	TOTAL FAMILY MONTHLY GROSS		DISPOSABLE						:	
		MOONE	\$1,275.00	PICONE (B)							I
Monthly amount we	could garnish				Monthly amoun	l we could garnish	after expenses have				
at 15% ((C)	\$163.06				been determined		\$163.06			
		disposi noome v	/o gamishment (E)	N/A				#3		:	1
		Mimimum	wage calculation	Г——	_				<u>103</u>	w	weekly
			\$669.50	1		REVISED	20-Jul-2004	· -··	pay	1 b	bi-weekly
Prior Garnishment C	alculations	:	30 X min wage	smallest	of #1, # 2 and #3		Prepared by		schedule	m	monthly
current non-ed gar	0.00%		\$417.54				M. Parker-Venable/	Hearings Officia	_	q	quarterly
percentage remaining		4	#2		#4C0 00	1.31.21		T		; · · · · · · · · · · · · · · · · · · ·	other
amt we could garnish				ality of	\$163.06	HR1	When prior gardishmal	 		\$	semi-month:
	#1			Garnishment :	amount per month		ppp at 15% (1)		pay type	-f ·	fixed amt
		·į.					ppp part hdsp (H)	\$288.02	<i></i> -	<u>v</u>	variable aml
discrine w/o gar (F)	\$576.04	(D26+l29)			\$81.53	per pay period		T		·!	1
Hosp w/o gar (G)	NO	1	-		Samuel of Research		1	4			

· W

January 23, 2005
At whom make concern:
In the last days I'le when in a Lithe
(b)(6) we ken I had received my freatment. Also
I made several plane call inquiry for my records at and by this time they not been able to sent any information to me.
(b)(6)
finished the program reliab in the (b)(6) (b)(6) For the lical (b)(6)
by this time they just tell me, that my record is the mactive files and going to take some time to find them.
That why I respectfully solverly for additional time to
and after tien con this matter, but bloss you.



LOAN DISCHARGE APPLICATION: FALSE CERTIFICATION (DISQUALIFYING STATUS)

OMB No. 1845-0015 Form Approved Exp. Date 05/30/2005

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

ECTION 1: BORROWER IDENTIFICATION	
	Please (b)(6) SSN (b)(6) Name (b)(6)
	Name _ (b)(6) Address _ (b)(6)
	City, State, Zip
	Telephone - Home ()
	Telephone - Other ()
	E-mail address (optional)
SECTION 2: STUDENT INFORMATION	
efore responding, carefully read the entire form, including the instruction and discharge, begin with tiem 3. If you are a (b)(6) Student's name (last first, middle initial):	ons and other information on the following page. If you are a student borrower applying for
. Student's SSN: (b)(6)	
s. School's name: Knbevt FIANCE	•
1. School's address (street, city, state, zip): Brecklyn N	led Yolk
i. Dates of attendance at the schook from O 4 - O 7 -	
	ident) were enrolled in when the school certified or originated the loan that you are requesting
time the school certified or originated your loan - to meet the legal req	ualitying status, you (or, for PLUS borrowers, the student) must have been unable – at the juirements for employment in your state of residence (or, for PLUS borrowers, in the student's as intended because of age, a physical or mental condition, criminal record, or other reason, below:
☐ Age ☐ Physical condition	cord
loan. Also, provide as much information as possible about the state leg meet. Include the title and/or section number of the specific state law o	wers, the student) had the disqualifying status at the time the school certified or originated you pai requirements for employment that you (or, for PLUS borrowers, the student) could not be regulation, or attach a copy of the law or regulation. You may obtain this information from the department of labor and employment, from a public library, or from an internet site that
8. (a) Before certifying or originating the loan, did the school ask you (or, ☐ Yes ☐ No ☐ Don't Know (b) Did you (or, for PLUS borrowers, the student) inform the school of ☐ Yes ☑ No	for PLUS borrowers, the student) if the disqualifying status explained in Item 7 existed? the disqualifying status before the loan was certified or originated?
 Did the holder of your loan receive any money back (a refund) from the If Yes, give the amount and explain why the money was refunded: 	e school on your behalf? Yes No Don't Know
10. Did you (or, for PLUS borrowers, the student) make any monetary claim in connection with enrollment or attendance at the school: ☐ Yes — x (a) Name/address/telephone number of the party with whom the claim	m with, or receive any payment from, the school or any third party (see definition in Section 5) a No Don't Know If yes, please provide the following information: was made or from whom payment was received:
(b) Amount/status of claim:	(c) Amount of payment received: \$
(-,	(Write "none" if no payment was received.)
SECTION 3: BORROWER CERTIFICATION	
My signature below certifies that I have read and agree to the terms and co	onditions that apply to this loan discharge, as specified in Section 6 on the following page, d on this form and in any accompanying documentation is true and accurate to the best of my
No.	Date: 1/23/05
Borrower's Signature:	Date: 1/23/33

AWG RFH	Cover Sheet 57M
Agency Code: 406 Prepared By: Patricia M Date Package Prepared:	atc Returned ED/ PIC:
Borrower's Name: Type RFH (check one): In-Person Tele;	SSN: (b)(6) phone Written Record
Objection Check All Objection(s) Identified Financial Hardship: Balance Dispute:	RFH PACKAGE Checklist Check All Enclosed Document(s) Request For Hearing Form or Letter Requesting Hearing Received from debtor and envelop (mandatory)
In- Repayment: Repaid SIF/PIF: Incorrect Amount: Bankruptcy: Active Chapter 7/13:	Copy of the File Records from Raytheon (mandatory) [] Requested A dated copy of Notice Requesting Additional Information (mandatory)
Discharged Chapter 7/13: Disability: Death:	Any Application(s) or Form(s) submitted by the Debtor (mandatory) Financial Disclosure Form (if applicable) Copies of two-2 pay stubs (if applicable)
Legal Exclusion: Employed less than 12 months: Unemployed: Terminated involuntarily from previous employment:	NA Copies of two-2 pay stubs for Spouse (if applicable) AWG Hardship Calculator (if applicable) Copy of the PCA Notepad (mandatory)
Third Party / SSN Dispute: Unpaid Refund Request:	2945.52
Dischargeability Claims: ATB (No GED): ATB (Not Qualified): \(\sum_{\text{closed School:}} \) Closed School: Unauthorized Signature:	3295.33 1560,22
Dates Mailed Requested for Documentation and/or No Date called borr: LMTC/ATT LM Mailed Extension of Deadline Ltr/Checklist: 12-14-6	TTC/ATTLMTC/ATTLMTC/ATT

					OF EDUCATION						
				_	arnishment Hear culation Worksh	_					
lini inggarati na na na	and an all a		ninanciai 1011 - Herrina	narusnin Gai	Culation Workship						
Borrower's Name:	b)(6)			GARNISHMENT *	15.00%						
Borrower's SSN:											
Date:							(b)(6)			-	
						City	17/10/			· 	
						Stata	3	<u> </u>			
Borrower Paid: Monthly (1), Bi-wookly (B)	V), Weekly (W),	Bi-Monthly (BM)	вм		County	9		міѕс	H/U	TRANS
Spouss Pald: Monthly (M)						Number in Family	(b)(6)		\$315.00	\$307.00	\$0.00
Additional Paid: Monthly	M), Bi-weakly (E	W), Weakly (W),	Bi-Monthly (BM)			Number of Cars			\$152.00	\$58.73 **** \$10.20	\$0.00
INCOME	Borrower	Spores	Other	Family Totals	EXPENSES	Standard Applicable	Areount Stated	Amount Accepted	\$0.00	\$29.34	\$0.00
GROSS PAY	\$637.50	\$0.00	\$0.00		Food, Hausekeeping Supplies, Append and		general seems of the state of		\$0.00	\$0.00	\$0.00
Federal Taxes	\$0,00	\$0.00	\$0.00		Spruicasa, Parsonal Care	\$942.00	\$467.00	\$942.00	\$0.00	\$0.00	\$0.00
		77100			Products, and Misselfensors Housing & Utilities	1					I
State Taxes	\$16.33	\$0.00	\$0.00		Standards Transportation	\$0.00	\$410.33	\$0.00	\$0.00	\$0.00	\$0.00
Local/City Taxes	\$0.00	\$0.00	\$0.00		Standards	#N/A	\$0.00	#N/A	\$467.00	\$410.33	\$0.00
FIÇA	\$39,53	\$0.00	\$0.00		0		\$0.00	\$0.00			
Medicare	\$9.24	\$0.00	\$0.00		0		\$0.00	\$0.00			
HEALTH INSURANCE	\$28.88	\$0.00	\$0.00		0		\$0.00	\$0.00		differential	\$410.33
	\$0.00	\$0.00	\$0.00		0		\$0.00	\$0.00		stated expenses*	\$487.00
: o =4.7	\$0.00	\$0.00	\$0.00		o di Capatta da	aratti talah	\$0.00	\$0.00		1	
H: H 0,12 %;	\$0.00	\$0,00	\$0.00		0		\$0.00	\$0,00			
monthly income						Trick Cold State of	1,5,44 (1,44), 144(1,5)	5 H	·	Misc	
adjustment (prior gernishment)	\$0.00	\$0.00	\$0.00				\$0.00	\$0.00	1	Expenses	\$0.00
						The state of the	1 yee - e. (4 V)		_	Misc Exp	
Total Deductions per Pay		135							l	minus	
Perfod :	\$93,98	\$0.00	\$0.00	3 35 3 5 5 5 5	0 -75 - 14-7		\$0.00	: \$0.00	<u> </u>	housing diff*	\$0.50
TOTAL MONTHLY DEDUCTIONS	\$187.95	FALSE	FALSE	ADDITIONAL FAMILY MONTHLY INCOME	TOTAL MONT	U V PVHCHAFA	\$ 877,33	\$0,00	!29-C32	discrincome minus gar	\$923.59
MONTHLY GROSS	4107.23	TALSE	INCOL	1		HLYEXPENSES	0011.00	40,00		sing differential	.p.72.0.00
INCOME	\$1,275.00	FALSE	FALSE	\$0.00		Y DISCRETIONARY mining after expenses)		\$1,087.05		n expenses	ļ
MONTHLY DISPOSABLE INCOME (A)	\$1,087.05	\$0.00	\$0.00	\$1,087.05							
syourses above che por	ROWER ONLY)	FOTAL FAMILY MONTHLY GROSS INCOME	\$4 97E 00	FAMILY MONTHLY DISPOSABLE INCOME (B)							
Monthly amount we c	-		\$1,275.00	1 "			after expenses have	\$442.00			
<u> </u>	()	\$163.06	(N/A		been determined	(0)	\$163,06 #3		1	
			∕o gamishment (E) vage calculation	14.0	1			<u> </u>	103	w	weekly
			\$669,50	1		REVISED	20-Jul-2004		pay	p	bi-weekly
Prior Garnishment C	elculations		30 X min wage	smallest	of #1, # 2 and #3		Prepared by		schedule	m	monthly
current non-ed gar	0.89%		\$417.55				PAT MCENTIRE		1	্ব	quarterly
percentage remaining	25.00%	f	#2	a na nanithuinni	\$4CO M	Radiga (1976)			:	0	other
amt we could gatersh	\$163.06			<u> </u>	\$163.06	HR1	When prior garnishmet			s	semi-mont
	#1	<u> </u>		Garnishment	amount per month		ppp at 15% (i)		pay type	ſ	fixed amt
							ppp part fidsp (Is)	\$543.53		v	variable ar
discr inc w/o gar (/°)	\$1,087.05	(D26+129)		<u> </u>	\$81.5	3 per pay period:	15.0%	L	<u> </u>		
Hdsp wlo gar (⊕)	NO								!]	

PM:12/7/04 n 406 w61

U.S. Department of Education **Financial Disclosure Statement**

To evaluate a hardship claim, ED compares the expenses you claim and support against averages spent for those expenses by families of the same size and income as yours. ED considers proven expenses as reasonable up to the amount of these averages. If you claim more for an expense than the average spent by families like yours, you must provide persuasive explanation why the amount you claim is necessary. These average amounts were determined by the IRS from different government studies. You can find the average expense amount that the Department uses at the website at: HTTP://WWW.ED.GOV/Offices/OSFAP/DCS. Select "Administrative Wage Garnishment," on the right side and then select "Collection Financial Standards."

- Complete all items. Do not leave any item blank. If the answer is zero, write zero.
- Provide documentation of expenses. Expenses may not be considered if you do not provide documents supporting the amounts claimed.
- Disclose and provide documentation of household income.
- Failure to provide this information and documentation may result in a denial of your claim of financial hardship as unproven.

Income	· 「「「「 」」」 「 」 「 」 「 」 「 」 「 」 「 」 「 」 「
Your Name: Address: (b)(6)	Your Social Security No.: (b)(6)
Address.	Phone: (b)(6)
(b)(6)	County:
Current Employer:	Date Employed:
Employer Phone:	Present Position: Labor
Gross Income: \$ 1,275	☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other
Net Income: \$ \\ \(\begin{align*} \dot{1087.05} \end{align*}	☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other
ENCLOSE: COPY	OF YOUR TWO MOST RECENT PAY STUBS AND
COPIES OF MOST RECEN	NT W-2s AND 1040, 1040A, 1040EZ or other IRS FILING
Number of dependents: (6)	(including yourself)
	d Single Divorced
Your spouse's name: (b)(6)	Spouse's SSN: (b)(6)
Gross Income: \$ 0	☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other
Net Income: \$ O	☐ Weekly ☐ Bi-Weekly ☐ Monthly ☐ Other

ENCLOSE: COPY OF TWO MOST RECENT PAY STUBS AND COPIES OF MOST RECENT W-2s AND 1040, 1040A, 1040EZ or other IRS FILING

(b)(6)			

					r, , , , , , , , , , , , , , , , , , ,
Other household : Gross Income: Net Income:	member(s) with incom \$ Week \$ Week	ne:	SSN: Monthly Otl Monthly Otl	ner	· · · · · · · · · · · · · · · · · · ·
	LOSE: COPY OF TW IOST RECENT W-2s				
Other Income Child support: Alimony: Interest: Public assistance Other:	\$ 9 Wee	kly 🗖 Bi-Weekly kly 🖟 Bi-Weekly kly 🖟 Bi-Weekly	y Monthly O y Monthly O y Monthly O y Monthly O y Monthly O	ther ther	
Please explain all	deductions shown on	pay-stubs:		·	
Deductions	Amount	Reason			
401k: SST Retirement: Med (a., Union Dues: Sk k) Medical: Credit Union: Other: Kent	c 18,48				
Monthly Expense	S Samuel			1. 1 × 2.	
Shelter (SEND COP Rent/Mortgage: 2 nd home mortgage Home insurance: Other: \$					
Food and Household Expenses: \$ 3 Clothing: \$ 1	1 3/5.00 152-00	***		м не	
Utilities (SEND CO Electric: \$ 5 Gas: \$ Water/Sewer \$ Garbage pickup: Basic telephone: Other: \$:		
Bill payments \$	PIES OF BILLS) /per month s not deducted from payor /per month s not covered by insurance	·			
			• •	* #	

Other: \$/per month
Describe:
Transportation (SEND COPIES OF CAR PAYMENT AGREEMENT OR BILLS)
Of cars
I ^{si} Car payment: \$/per month
2ndCar payment: \$ /per month
Gas and oil: \$ /per month
Public transportation: \$/per month
Car insurance: \$/per month
Other: \$ Describe:
Child Care (SEND COPIES OF BILLS)
Child care: \$/per month Number of children:
Child support: \$/per month Number of children:
Other: \$/per month Describe:
Other Insurance: \$ Describe:
Other Expenses (Attach a list describing expense, monthly payment and enclose bills)
Based on this Statement, I think I can afford to pay \$ 30.00 per month I declare under nepalty of Daw that the answers and statements contained herein are true and correct. Signature Date Date Date Warning: I8 U.\$.C. 1001 provides that "whoeverknowingly and willfully falsifies, conceals, or covers up by any trick, scheme, or device a material fact, or makes any materially false, fictitious, or fraudulent statement or representationshall be fined up to \$10,000.00 or imprisoned up to five years, or both."
Complete, sign, and return the requested information and documentation to:
U.S. Department of Education AWG Hearing Unit 61 Forsyth Street, Room 19T89 Atlanta, GA 30303
Britana And Madina

Privacy Act Notice

This request is authorized under 31 U.S.C. 3711, 20 U.S.C. 1078-6, and 20 U.S.C. 1095a. You are not required to provide this information. If you do not, we cannot determine your financial ability to repay your student aid debt. The information you provide will be used to evaluate your ability to pay. It may be disclosed to government agencies and their contractors, to employees, lenders, and others to enforce this debt; to third parties in audit, research, or dispute about the management of this debt; and to parties with a right to this information under the Freedom of Information Act or other federal law, or with your consent. These uses are explained in the Federal Register of June 4, 1999, Vol. 64, p.30166, revised Dec. 27, 1999, Vol. 64, p. 72407. We will send a copy at your request.

REQUEST FOR HEARING

If you o	bject to garnishmer. Your request mu	nt of your wages for the	e debt describ nailed or del	bed in the notice, yo	ou can use this for	m to request a	
Your N	(p)(e)	- Accidentation		(b)(6)			
Address	/I=\//C\		3	SN:			
Telepho	one: (b)(6)						
Employ	Address: (b)(6)					.i i∧	A /
	Telephone:	f.C F. January					
	Beginning Date O	f Current Employment	C:				
-	able pay would ca	if you object on the puse financial hardshipmer service at the nu	ip to you an	d your dependents			
Form of records you will	of your choosing to s, and proof of exp Il be notified of th , ED will make its	er the enclosed FINA to present your hards benses, as explained the date, time, and loc determination of the	hip elaim, Y on the form ation of you	ou must enclose of the second	copies of earning for an oral heari request for an o	s and income ng is granted, ral hearing is	
NOTE:		state below any othe	r objections	you have to garn	ishment to colle	et this debt at	
BY CA	LLING THE CUS	NTEREST TO REQU TOMER SERVICE I EQUEST FOR HEAR	NUMBER L				
I. HEA	ARING REQUES	ST (Check ONLY C	ONE of the	following)			
		rds hearing of my ob closed, and the record	•		ew of this writte	n statement,	
	•	nearing at the ED heases to appear for this	-	to present my obje	ection(s). I unde	rstand that I	
	I want this In-Per Francisco, CA. (rson hearing held in: Check the location y	Atla	nta, GA,	Chicago. IL	San	
number	ant a hearing by to at which you can be reached at:	elephone to present n	ny objectior en the hours	es. You must prov of 8:00 am to 4:0	ide a daytime tel 0 pm, Monday t	ephone hrough Friday.	
	 			<u></u>	- .		-
	(b)(6)						

II. 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 III 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 the additional facts that you believe make a hearing necessary on a separate sheet of paper. If you have already fully described these facts in your response in Part III, WRITE HERE the number of the objection in which you described these facts......)

Note: If you do not request an in-person or telephone hearing, we will review your objection based on information and documents you supply with this form and on records in your loan file. We provide an oral hearing to a debtor who requests an oral hearing and shows in the request for the hearing good reason to believe that we cannot resolve the issues in dispute by review of the documentary evidence, for example, when the validity of the claim turns on the issue of credibility or veracity.

III. Check the objections that apply. EXPLAIN any further facts concerning your objection on a separate sheet of paper. ENCLOSE the documents described here (if you do not enclose documents, ED will consider your objection(s) based on the information on this form and records held by ED).

For some objections you must submit a completed application. Obtain applications by contacting Customer Service at the number below, or go to ED's website at:

<u>HTTP://WWW.ED.GOV/Offices/OSFAP/DCS</u>, select Forms, then select the application described for that objection.

- 1. () I do not owe the full amount shown because I repaid some or all of this debt. (ENCLOSE: copies of the front and back of all checks, money orders and any receipts showing payments made to the holder of 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 the repayment agreement and copies of the front and back of checks where you paid on the agreement.)
- 3. () I filed for bankruptcy and my case is still open. (ENCLOSE: copies of <u>any documents from the court</u> that shows the date that you filed, the name of the court, and your case number.)
- 4. () This debt was discharged in bankruptcy. (ENCLOSE: copies of debt discharge order and the schedule of debts filed with the court.)
- 5. () The borrower has died. (ENCLOSE: CERTIFIED Copy of Death Certificate.) For Loans only.
- 6. () I am totally and permanently disabled unable to work and earn money because of an impairment that is expected to continue indefinitely or result in death. Obtain and submit completed Total and Permanent Disability Cancellation Request; must be completed by physician. For loans only.
- 8. () I used this loan to enroll in _____ (school) on or about __/__/, and I was unable to complete my education because the school closed. Obtain and submit completed Loan

date.) For loans only.	ny records you have showing your withdrawal
9. () This is not my Social Security Number, and I dediver's license or other identification issued by a federa your Social Security Card.)	
10. () I believe that this debt is not an enforceable debt the attached letter. (Attach a letter explaining any reason to collection of this debt amount by garnishment of you	n other than those listed above for your objection
11. () I did not have a high school diploma or GED we guaranteed student loan. The school did not properly test Obtain and submit completed Loan Discharge Application Enclose any records you have showing your withdrawal 12. (X) When I borrowed this guaranteed student loan condition (physical, mental, age, criminal record) that performing the occupation for which it trained me. Obta Application: False Certification (Disqualifying Status).	st my ability to benefit from the training offered. ion: False Certification of Ability to Benefit. I date For loans only. I have Figure Hair Deging n to attend (school), I had a revented me from meeting State requirements for ain and submit completed Loan Discharge For loans only. Size Bihih A ployment and I have been employed in my current
gob for less than twelve months. (Attach statement from statement from prior employer showing involuntary terr	n employer showing date of hire in current job and
14 () I believe that (School) without my performance of the completed Loan Discharge Application: Unauthorized Streeords you have showing your withdrawal date). For loan controls of the control of the	r (EFT) authorization. Obtain and submit Signature / Unauthorized Payment. (Enclose any
IV. I state under penalty of law that the statements made of my knowledge. (b)(6)	de on this request are true and accurate to the best
DATE: 12/0/04 SIGNATUR	
SEND THIS REQUEST FOR HEARING FORM TO:	U.S. DEPARTMENT OF EDUCATION Atlanta Service Center Attn: AWG Hearings Branch 61 Forsyth Street, Room 19T89 ATLANTA, GA 30303
If you wish to arrange a voluntary agreement for payme	nts in amounts equal to 15% of your disposable

pay, do not use this form. Instead, call the Customer Service Number Below.

ED Customer Service (800) 621-3115

Violation of any such agreement may result in an immediate order to your employer for garnishment of 15% of your disposable pay.

This is an attempt to collect a debt and any information obtained will be used for that purpose.



Deductions

Taxable Marital Status (b)(6) Exemptions/Allowances: Federal: Tax Exempt State: \$58 Exemption

Social Security Number (b)(6)

Net Pay

Statutory

Earnings	rate	hours	this period	year to date
Regular	7.3555	86,67	637.50	12,813.81
Double	4			1,493.15
	Gross Pay		\$637.50	15,742.71

Social Security Tax	-39.53	976.05
Medicare Tax	-9.24	228.27
PR State Income Tax	-16.33	432.85
PR SUI/SDI Tax		27.00
Other		
Checking	-443.52	
Medica!	-28.88	606.48
Rent	-100.00	3,170.00

\$0.00

Period Ending: Pay Date:

11/15/2004 11/15/2004



Other Benefits and		
Information	this period	total to date
V	5:00	

Important Notes

Earnings Statement

(b)(6)

Taxable Marital Status: (b)(6) Exemptions/Allowances: Federal: Tax Exempt \$58 Exemption State:

			(h)
Social	Security	Number	(5)

Earnings	rate	hours	this period	year to date
Regular	7.3555	70.67	519.81	13,333.62
Enfermedad	7.3555	16.00	117.69	
Double .				1,493.15
	Gross Pay		\$637.50	16,380.21
Deductions	Statutory			
	Social Secur	ity Tax	-39.52	1,015.57
	Medicare Ta	x	-9.24	237.51
	PR State Inc	come Tax	-16.33	449.18
	PR SUI/SDI	Tax		27.00
	Other			
	Checking		-336.53	
	Medical		-28.88	635,36
	Rent		-207,00	3,377.00

Net Pay

\$0.00

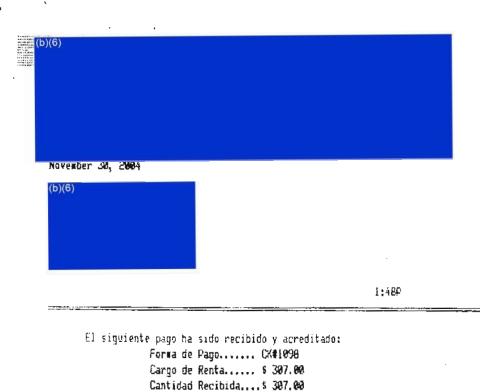
Period Ending: Pay Date:

11/30/2004 11/30/2004



Other Benefits and Information	this period	total to date
E	8.00	
V	5.00	

(b)(6)Formulario (b)(6) Form 499R-2/W-2P1 Rev 05.03 DEPARTMENT OF THE TREASURY SOCIAL SECURITY INFORMATION INFORMATION 1. Nombre-First Name 8 Suelans - Wages 3 Núm, Seguro Social. 17 Total Sueldos Seguro Social Social Security No. Social Security Wages (b)(6)(b)(6) 16937.93 16937.93 Apellido(s)-Surname(s) Estado Civil - Civil Status 9. Comisiones-Commissions Casaco Married X 18. Seguro Social Retenido Soltero (b)(6) Social Security Tax Single Withheld Dirección Postal del Empleado-Employee's Mailing Address 5 Núm Sagura Social Conyuge 10. Concesiones-Allowances Spouse's Sucial Security No. 1050.15 (b)(6)19 Total Sueldos y Pro. Medicare Medicare Wages and Tips 11. Propinas-Tips 6. Nom de Ident, Patronal 16937.93 (b)(6) i20 Contrib Medicare Retenida 2. Nombre y Dirección Postal del Patrono Medicare Tax Withheld 7 Costo de Pension o Anualidad. 12. Total = 8 + 9 + 10 + 11 Employer's Name and Mailing Address Cost of Pension or Annuity (b)(6)16937.93 245.60 13. Gastos Reembolsados 21 Propinas Saguro Social Reimbursed Expenses Social Security Tips (b)(6) Número de Teléfono del Patrono 14. Cont. Retenida - Tax W-thheid 122. Seguro Social no Retenido Employer's Telephone Number. 440.34 Fecha Cese de Operaciones en Propinas-Uncollected Social Security Tax on Tips Operations Deasing Date 15 Fondo de Retiro Num**ero C**ontrol - Control Number Retirement Fund A Año: 2003 23. Contrib. Medicare no Retenida. ADP 16 Aportaciones a Planes Cualing. er Propinas-Uncollected Contributions to CODA PLANS Medicare Tax on Typs Instrucciones al dorso Copia B - instructions on back of Copy B0 4 /- TO



Este pago ha sido acreditado en su cuenta de la siguiente manera:

	Bal. Anterior	Recibído	Bal. Actual	
RENTA	\$307.00	£307.00	18,00	. .
FOTAL	1307.00	-158 7.00 	18, 96	

Le agradecatos por su pagr. Si tiene algun probleza en su unidad no cuce en comunicarse con noscros.

E≱itide por:

(b)(6)

ō	RMACION GENERAL		D	TALLE DE L	A FACTURACIO	N	IMPORTES
(b)(l	(b)(6)		(b)	(6)			\$58.73 24.07
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	12-16-04					•	
	(12-23-04 (b)(6)	ľ					
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			s		AL IMPORTE	A PAGAR	\$82.60
(b	DATOS LECTURA/FACTURACION (6)	CONTADOR	ACTUAL		CONSTANTE	CONSUMO	COMPRADE ENERGIA Y
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	O IMPORTANTE: Tiene hasta la fecha de m nación vea el dorso de esta hoja. Pagó con:				bito cobrade		
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	Cualquier balance final vencido notificarse a una agencia de crédi una agencia de cobro.	podrá to y a			FECHA DE I		:
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1	S department of the control of the c		<u> </u>		DACHE CALC	FECHA DE VEN	CIMIENTO
5		at more as a second			PAGUE EN C	12-10-0)4
5	Su pago no se ha recibido, Envie su	pago hoy, S	i lo envió	tavor de (jnorar este a	/iso.	
S							
-1-1	No mulike es	ste talón ni ma	inche o esc	tiba en el áre	a bianca.		

(b)(6)b)(6)

PARA SERVICIOS LLAME AL:

811

Solicitud de Servicio Residencial/ Negocio Pequeño Orientación de factura Residencial/Negocios

Reportar Averias de Residencias Contrato de Mattenamento Residencias

787 792 6262

Ventas Servicios a Empresas

787 729-3131

Reportal Averias Negocios

Visitanos en: www.telefonicapr.com

· Usted tiene 15 días después de la fecha de envío de la factura para reclamar los cargos contenidos en ella, y/o solicitar investigación de aquellos que considere incorrectos.

Ralances	eп	Atrasos	o	Créditos
OHIUNCLE	4.2	711 4303	v	CICUITOR

\$0.14 CR

Resumen de Cargos Corrientes

Servicios PRT Renta Servicios Básicos Mensuales Acceso Línea Impuesto por la FCC Servicio Medido / Servicio Local Cargos Directorio WATS Uso de Información Otros Cargos y/o Créditos	22.84 6.50 0.00 0.00 0.00 0.00 17.54
Total de Servicios PRT	46.88
Total de Larga Distancia	0.52
TOTAL DE CARGOS CORRIENTES	47.40
Fecha de Vencimiento	05 NOV 2004
TOTAL A PAGAR	\$47.26

[·] Para evitar un cargo por demora de 1% en su factura, el pago debe ser recibido en o antes de la fecha de vencimiento ındicada.

Las guias telefónicas del Area Metro fueron distribuidas en agosto. Las guías Isla serán distribuidas en diciembre. Recuerde reciciar sus guias anteriores. Fora servicio de información consulte su guía telefánica o Hámenos al 411, El costo por llamada es de 754 y 254 para completar la misma.



Autoridad de Acueductos y Alcantarillados

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A	GT	VA	A	CIO	H	X ***	

CLIENTE		NUMERO DE CUENTA	FECHA DE VENCIMIE	nd rom chann
(b)(6)	- 10.00 No.00	(b)(6)	(b)(6)	\$15.26
(b)(6)		LECTURA ANTERIOR	LECTURA ACTUAI	(b)(6)
CARGOS/CREDITOS	IMPORTE b)(6)	TARIFA: (b)(6)	UENTA DA	ATOS DEL SERVICIO
BALANCE ANTERIOR		FECHA FACTURA:	(b)(6)	7
PAGOS		LECTURA HASTA:		
AGUA		DIAS DE CONSUM		
ALCANTARILLADO		A SATE	ASOS VENCIDOS PODRAN SER I	PEECUNOC .
SUBSIDIO		AGRANDOM ESTIMADO	AGENCIA DE MEORMACION DE EAU: 1 Y À UNA EMPRESA PRIVA A EL AREA DEL CONTADOR VISIE	CREDITO DA DE COBROS.
		(b)(6)		
TOTAL A PAGAR	\$15.26			

INVOICE DISCRIPCH QUIDE: BY DISCRIPCH OF LAW 33 OF MER 27,1985 YOU HAVE UP TO THE DUE DATE TO PAY OH OBJECT AND REQUEST AN INVESTIGATION HEGARDING ANY CHARGE NOT POLLOWED, SERVICE MAY BE SUSPENDED AFTER THE DUE DATE, FOR MORE INFORMATION PLEASE CALL, OUH CUSTOMER SERVICE CENTER OR NISHTING COMMERCIAL, CAFICE WHERE YOUR SERVICE IS PROVIDED.



December 14, 2004



RE: NOTICE OF INTENT TO GARNISH

Extension of Deadline for Submitting Documentation

This notice is in response to your written Request for Hearing on your objection(s) to the Notice of Intent to Garnish that you were just sent by the Department of Education. We have been requested by the Department to obtain the information described here from you in order to expedite your hearing.

The Notice of Intent to Garnish explained that you are responsible for providing evidence to support any objection(s) you make to garnishment. The Notice also explained that, with some exceptions, the Department would consider only the evidence you submitted with your Request for Hearing. You have provided no evidence or documentation to support the objection(s) you raised in your Request for Hearing.

You must make a hearing request in writing, and send it to ED at the address on the enclosed Request for Hearing (RFH) form. If your request is postmarked or received by us within 30 calendar days of the date of this notice, we will not garnish until we complete the requested hearing and determine that garnishment is justified. If your request for hearing is postmarked (if mailed) or received (if not mailed) after that date, we will still conduct a hearing but we will not delay this garnishment unless you demonstrate to us that the delay was caused by factors over which you had no control. If we find that the debt is not owed as stated or not enforceable at this time, we will refund payments as needed.

The Department extends until 1/9/05, the deadline for submitting evidence "only" to support the objections you raised in your Request for Hearing.

We then must forward your Request for Hearing and any material we have received from you by that date to the Department's Administrative Wage Garnishment Hearings Branch, we will conduct the hearing you requested on your objections, based on that material and the Department's own records regarding your debt. Unless you submit material to support your objections, the Department advises that it may find that your objection(s) are not substantiated and that the debt is fully enforceable by garnishment at this time. If you have any evidence or documentation to support your objection(s) that you want the Department to consider, please forward that material promptly to the following address:

U.S. Department of Education c/o Diversified Collection Services, Inc PO Box 5239, Grants Pass, OR 97527-0239 Phone (888) 335-6267 Fax (541) 955-0861 or 955-0928

You may contact the Department's Customer Service Number at 1-800-621-3115 to request the appropriate financial disclosure form or discharge application or go to the Department's website at: http://www.ed.gov/offices/OSFAP/DCS, select Forms, and then download the apprepriate application or form to present your objection. You may also complete and return the enclosed form(s) for other objections. If you filed bankruptcy over ten (10) years ago, please provide the case number, date of filing, location filed, and a copy of the Notice of Discharge. If you move before you receive a response, please provide a change of address and telephone number where we may contact you. If you have any further questions, you may contact your Contract Service Representative at (888) 335-6267.



December 14, 2004



RE: NOTICE OF INTENT TO GARNISH ACCOUNT NO: (b)(6)

Your Request for Hearing lacked evidence/documentation that may support the objections you raised to gamishment. The missing evidence is checked below. The notice states the extended deadline date to provide this evidence to support your objections. If you cannot supply the evidence by the deadline date, you may request an extension of time to provide that evidence, Make that request to this office, and explain why you need added time. ED will notify you whether the request is approved and the new deadline. The evidence you provide should be forwarded to the address listed below. Submitting evidence does not guarantee that your objection is proven. ED evaluates any evidence you provide in order to determine whether your objection is proven.

US Department of Education c/o Diversified Collection Services, Inc P.O. Box 5239, Grants Pass, OR 97527-9908 Phone (888) 335-6267 Fax (541) 955-0861 or 955-0928

The evidence checked-off below is requested:

Financial Hardship Documentation Financial Disclosure Statement Two most recent Pay Stubs Two most recent Spousal Pay Stubs Proof of All Listed Expenses over \$100.00/month Proof of Childcare Expenses (see attached form) Last Year Completed 1040 Tax Return Proof of Medical Expenses Proof of binding voluntary agreements to pay obligations for taxes or family support If any proof does not show the monthly amount paid, you must state the amount you are paying per month. You should also provide the date you expect the expense to be paid off.	Completed Discharge Application For: Closed School Discharge Application Unauthorized Signature Discharge Application 2 Copies of Original Signatures made within 1 year of date promissory note was signed Three other Specimens of Original Signatures Ability to Benefit Discharge Application Unpaid Refund Application Total and Permanent Disability Application Proof of Bankruptcy Filing and Discharge
Evidence to Support Balance Dispute Proof of Missing Credits (copies of front and back of checks/traced money orders) Proof of Payment in Full Proof of Repayment Agreement Documentation Supporting Reduction of Balance	Miscellaneous Information Proof of Involuntary Termination Proof of date started current employment Proof of Temporary Unemployment Copy of Driver License Copy of Social Security Card Copy of Birth Certificate

Account Detail || Full Transaction History || Debt Summary || Payment History || Payment Arrangement Summary || Post Transactions || Requesting Letter || OnLine Requested Letter(s) Status

Full Transaction History

Account Name	(b)(6)	
Filter By	Full Transaction	

Click on table columns to sort by Ascending or Descending order

Date/Time	TCode	Description	UserII	D
12-22-2004 15:44	DRdA018XXD	Rec'd Outgoing Documentation - Reviewed * Financial Hardship Calculator Worksheet	13761	1
12-22-2004 15:34	DRcA018XXD	AWG-Rec'd Outgoing Documentation * 2004-12-22- 00.00.00.000000	13761	Ī
12-22-2004 13:47	MNeR020XXD	New Phone Number *	13761	7
12-15-2004 09:40	DRdA018XXD	Rec'd Outgoing Documentation - Reviewed * req for hearing sent	15988	ľ
12-14-2004 15:39	DRcA018XXD	AWG-Rec'd Outgoing Documentation * 2004-12-14- 00.00.00.000000	13761	\
12-14-2004 14:04	MApA501XXD	AWG Request for Hearing - Hardship * also claims ATB	13761	7
12-14-2004 14:04	DRdA010XXD	AWG-Req for Hearing Form - Reviewed * ***AWG RFH REC'D, PM DATE 12/7/04, THR***	13761	\ \
12-13-2004 16:13	DRcA010XXD	AWG-Request for Hearing Form Received * 2004-12-13-	13761	
12-01-2004 15:38	TCoR504RPD	Subsequent Contact Refuses to Pay * brr claims he did a deferment	15343	7
12-01-2004 15:36	TRsR502XXD	Debtor Left Message on Voice Mail *	15343	c
11-23-2004 16:12	IMaK039XXX	Address Search - Match *	15343	7
11-12-2004 15:48	SApA003XXD	AWG Approved * For AWG vol pmts need pstubs, signed repayment agreement letter and first pmt by response deadline of 12/15/04.	14788	7
11-12-2004 13:00	SApA502XXD	Pending AWG Approval *	14105	F
11-12-2004 13:00	SApA004XXD	AWG - Account Review - Audit for Approval Complete *	14105	A
11-11-2004 13:46	RMoA001XXD	AWG - Resume Activity *	14788	
11-07-2004 21:28		Sent, Financial Statement Letter * The Letter Request is processed on 2004-11-07-00.00.00.000000 is sent to []ARIST CHAVIER B-34 APT305 PONCE PR 00728	0	L
11-05-2004 11:48	TAtR502XXD	Attempt No Answer *	15343	С
11-02-2004 15:57	SMoA518XXD	AWG Account Review Suspended * 1g ws	14788	A
11-02-2004 10:53	PMoA004XXD	AWG - Account Review - Audit for Suspend Complete * 1a	14105	A

10-29-2004 10:54	TXxA010XXE	AWG - Payroll Address Confirmed * use address on file	14788	A
10-29-2004 10:53	TBuR503XXE	Attempt Busy *	14788	6
10-29-2004 10:53	TAtR504XXE	Attempt Other - No Message * disconnected	14788	0
10-27-2004 14:26	SApA001XXD	AWG - Account Review - Audit for Approval * ws	14788	A
10-27-2004 14:26	RMoA001XXD	AWG - Resume Activity *	14788	T
10-26-2004 20:38	LSnR132XXD	Sent, Warning Letter (Priority/Univ) * The Letter Request is processed on 2004-10-26-00.00.00.000000 is sent to	0	L
10-26-2004 14:52	TAtR501XXD	Attempt Answering Machine - No Message *	15343	0
10-25-2004 16:38	TAtR505XXD	Attempt * daughter sd brr not in at this time	15343	0
10-12-2004 00:23	LSnR241XXD	Sent, Compromise/Rehab Letter after Contact * The Letter Request is processed on 2004-10-11- 00.00.00.000000 is sent to (b)(6)	0	
10-12-2004 00:17	LSnR149XXD	Sent, Financial Statement Letter * The Letter Request is processed on 2004-10-11-00.00.00.000000 is sent to (b)(6)	0	L
10-11-2004 16:59	MMcA510XXD	Account Cancelled from AWG Todays Work Bin *	14788	Α
10-05-2004 11:48	MMoR512XXD	Account Removed from Asset Inv/Skiptrace Bin *	15343	0
10-05-2004 11:48	TAtR505XXD	Attempt * brr not in office current ly emp here out to lunch	15343	0
10-04-2004 15:21	MMcR511XXD	Account Scheduled to Asset Inv/Skiptrace Bin * doc att to reach brr at work	15343	0
10-04-2004 15:09	SMoA518XXD	AWG Account Review Suspended * 1a,1b,1g,1f ws	14788	A
10-04-2004 15:07	WXxX001XXD	AWG-Additional Comments * lm cltr 1wrk atmpt	14788	0
10-04-2004 15:04	MMoA509XXD	Account Scheduled to AWG Todays Work Bin * fs	14788	Α
10-04-2004 15:04	MMoA509XXD	Account Scheduled to AWG Todays Work Bin * ci	14788	Α
10-04-2004 08:41	TRsA004XXD	Refer for AWG Review *	15343	А
10-04-2004 08:41	MMoR512XXD	Account Removed from Asset Inv/Skiptrace Bin *	15343	0
10-04-20 04 08:41		Attempt * joylin torres in pyrll confirmed brr current employed as handyman makes 1275, per month	15343	0
10-04-2004 08:40		Modify Employer Information *	15343	0
10-04-2004 08:38	MNeR020XXD	New Phone Number *	15343	o
10-02-2004 07:43		Subsequent Contact Refuses to Pay * brr very argumentative sd he will not pay this debt	15343	c
09-30-2004				П

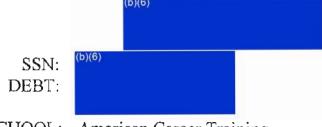
16:12	MMoR511XXD	Account Scheduled to Asset Inv/Skiptrace Bin * pyrll add	15343	C
09-29-2004 21:52	LSnR139XXD	Sent. Transfer Letter (Initial Demand) - Univ/Sens * The Letter Request is processed on 2004-09-29-00.00.00.0000000 is sent to (b)(6)	0	L
09-29-2004 20:55	LSnR142XXD	Sent, Refuses To Pay Letter * The Letter Request is processed on 2004-09-29-00 on no nonnon is sent to (b)(6)	0	
09-29-2004 20:39	LSnR017XXD	Sent, Call Letter * The Letter Request is processed on 2004-09-29-00.00.00.0000000 is sent to (b)(6)	0	T
09-29-2004 10:55	INoK520XXX	No Match, Ad Hoc Directory Lookup (Residential) *	15343	7
09-29-2004 10:55	INoK520XXX	No Match, Ad Hoc Directory Lookup (Residential) *	15343	F
09-29-2004 09:11	INoK039XXR	Address Search - No Match *	15343	T
09-29-2004 09:10	MMoR024XXD	Modify Address *	15343	0
09-29-2004 09:06	IMaK602EXD	Experian Full Credit Report - Match *	15343	F
09-29-2004 09:05	MBdR019XXD	Good to Bad Phone Number *	15343	6
09-29-2004 09:04	IMaK530XXD	Match, Full Telephone Match *	15343	F
09-28-2004 21:06	LSnR139XXD	Sent. Transfer Letter (Initial Demand) - Univ/Sens * The Letter Request is processed on 2004-09-28-00.00.00.000000 is sent to (b)(6)	0	į.
09-28-2004 14:57	TCoR504NCP	Subsequent Contact No Commitment * brr gv perm to speak w/ jazmin wanted info on pymt	15343	С
09-28-2004 14:51	MMoR024XXD	Modify Address *	15343	0
09-28-2004 14:50	MNeR501XXP	New Rep Name *	15343	0
09-27 2004 23:50	LSnR139XXD	Sent. Transfer Letter (Initial Demand) - Univ/Sens * The Letter Request is processed on 2004-09-27-00.00.00.000000 is sent to (b)(6)	О	L
09-27-2004 13:32	TCoR501NCD	First Demand Contact No Commitment * gv demand to spouse sd brr at work, will hv him c/b	15343	C,
09- <mark>27-2004</mark> 13:31	MMoR020XXD	Modify Phone Number *	15343	0
09-27-2004 13:31	MMoR020XXD	Modify Phone Number *	15343	О
09-27-2004 13:29	MNeR017XXS	New Name *	15343	0
09-27-2004 13:29	MNeR501XXE	New Employer Information *	15343	0
09-27-2004 13:28	MSwR501XXD	Switch Debtor Phones *	15343	0
09-27-2004 13:28	MBdR019XXD	Good to Bad Phone Number *	15343	0

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October 17, 2005

(b)(6)



SCHOOL:

American Career Training Travel School and American Career Training Travel School

Dear (b)(6)

This letter acknowledges receipt of your sworn statement that was received by the Department of Education (the Department), requesting the discharge of your Guaranteed Student Loans (GSL), because you indicated that your signature was forged on the application and promissory notes for attendance at the school referenced above.

You indicated on your application that you did not sign the Application/ Promissory Note, and you did not attend Robert Fiancé Hair Design Institute or American Career Training Travel School.

However, after a review of your application and the samples that you provided, I have concluded that the contested signature on each of the loan documents in question is authentic. Furthermore, based upon this evidence I have determined that you do not qualify for a discharge of the above referenced loans under the Unauthorized Signature regulations, CFR §682.402(e).

Since you stated on the loan discharge application that you did not attend Robert Fiancé Hair Design Institute or American Career Training Travel School, you may be eligible for a loan discharge due to an unpaid refund. For a review and possible discharge of your student loan due to an Unpaid Tuition Refund, please complete and return the enclosed application to:

50 United Nations Plaza, San Francisco, CA 94102

hited Nations Plaza, San Francisco, CA 94102 1-800-621-3115 www.studentaid.ed.gov U. S. Department Of Education Borrower Services/Closed School Loan Discharge Applications P. O. Box 422037 San Francisco, CA 94142

This decision covers only the Guaranteed Student Loan held by the Department listed above that was obtained to attend United College. The Department has made no determination regarding loan (s) that are held by other guaranty agencies, servicers, lenders, or educational institutions. If you believe that you may be eligible for discharge of other loans, you should contact the holder of those loans.

For any additional information please call 1-800-621-3115.

Sincerely,

W. Guidry

Loan Analyst

Loan Service Branch

Enclosure



LOAN DISCHARGE APPLICATION: UNAUTHORIZED SIGNATURE/UNAUTHORIZED PAYMENT

OMB No. 1845-0015 Form Approved Exp. Date 05/30/2005

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

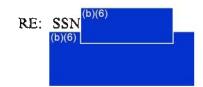
*38

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include lines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

which may include sines, impresonment or odin, shi	per ting this. Criminian code and 2d discr. 1037.
SECTION 1: BORROWER IDENTIFICATION	
	Pleas (b)(6) SSN
	Name (b)(6) (b)(6)
	Address _ (b)(6)
	City, State, Zip
	Telephone - Home ((b)(6)
	Telephone - Other (
	E-mail address (optional)
SECTION 2: STUDENT INFORMATION	
oan discharge, begin with item 3. If you are a (b)(6)	tructions and other information on the following page. If you are a student borrower applying for je, begin with Item 1.
1. Student's name that first mindle initials: (b)(6)	
2. Student's SSN: School's name	& name but I believe is some Robert Someth
4. School's address (street, city, state, zip):Unknow)	
5. Dates of attendance at the school: From ~	To Su Dio not attend
If No, on which document(s) did someone also sign your name?	note (MPN), or combined application/promissory noty for your loan(s)? Promissory note MPN Grombined application/promissory note
 Did you end\u00f3rse each loan check or sign your name on each elect \u00e44 Yes \u00b3 \u00e4 No \u00e4 \u00e4 Does Not Apply 	ronic funds transfer authorization or master check authorization?
If No, on which document(s) did someone else sign your name? If No, did you (or, for PLUS borrowers, the student) ever receive;	loan check □ electronic funds transfer authorization □ master check authorization by money from the school, or did the school ever reduce the amount of money that you (or, for □ Don't Know □ If Yes, explain (give dates, amounts, and circumstances):
If No or Don't Know, explain how you (or, for PLUS borrowers, th	
I DID NOT ATTEND ANY SUC)	
8. If you answered No to Jern 6 or Item 7, do you know who signed O Yes No If Yes, Identify the person who signed your name	· · · · · · · · · · · · · · · · · · ·
School employee or representative (name and position):/_	N/A
Other person (name):	
Provide any other information about the circumstances under whi	ch another person signed your name:
IMPORTANT: If you did not sign your name on one of the document signature in addition to the signature on this application. At least two after the date of the document on which someone else signed your signature was written include—but are not limited to—cancelled child be considered for a loan discharge.	s listed in Item 6 or Item 7, you must attach documents containing four other samples of your of these samples must clearly show that your signatures were written within one year before or name. Examples of documents that would include both a signature sample and the date that the ecks, tax returns, and driver's licenses. If you do not provide these signature samples, you cannot
 Did the holder of your loan receive any money back (a refund) from If Yes, give the amount and explain why the money was refunded 	m the school on your behalf?
10. Did you (or, for PLUS borrowers, the student) make any monetar in connection with enrollment or attendance at the school: (a) Name/address/telephone number of the party with whom the content of the party with the party with whom the content of the party with whom the content of the party with whom the content of the party with whom the content of the party with the party	y claim with, or receive any payment from, the school or any third party (see definition in Section 5) s SyNo Don't Know II yes, please provide the following information: claim was made or from whom payment was received:
(b) Amount/status of claim: N/A	(c) Amount of payment received: \$
SECTION 3: BORROWER CERTIFICATION	
My signature below certifies that I have read and agree to the terms:	and conditions that apply to this loan discharge, as specified in Section 6 on the following page. Divided on this form and in any accompanying documentation is true and accurate to the best of my
knowledge and belief. (b)(6)	
Borrower's Signature:	Date: 8-9-05
Annower a diffugious	Uate: O 1 U.S







Dear

This letter acknowledges receipt of your sworn statement requesting discharge of Federal Family Education Loans due to an unauthorized signature.

Your application for loan discharge under the Unauthorized Signature regulations CFR §682.402(e), is being returned to you for the following reasons:

- _X_ Information regarding the school and attendance on the discharge application is incomplete.
- X Student borrowers requesting loan discharge due to the unauthorized endorsement of a promissory note, loan check or electronic funds transfer are required to provide five different authentic specimens of his or her signature, two of which were made within one year of the contested signature. Without the authentic signature specimens, a determination cannot be made regarding the validity of the contested signature.*

Please return the attached discharge application with your signature specimens.

	Section	of the discharge application is illegible.
X	_ You did not pu	t a date on the application
	Other	

*If you cannot provide the required signature samples, you may, at your own expense, retain the services of a handwriting expert. If this expert determines that the signature on the contested loan documents is not yours, we will reconsider our decision. The handwriting expert must write to this office on their letterhead and provide a detailed explanation of their analysis.

If you have any questions or desire additional assistance please contact our customer service at 1-800-621-3115 or Winnie Guidry, Loan Analyst at (415) 487-5034. Or you may visit the official U.S. Department of Education website at http://www.ed.gov/index.jhtml

Sincerely,

oan Analyst

Enclosure



LOAN DISCHARGE APPLICATION: UNAUTHORIZED SIGNATURE/UNAUTHORIZED PAYMENT

OM8 No. 1845-0015 Form Approved Exp. Date 06/30/2005

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

Exp. Date 06/30/2005

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Griminal Code and 20 U.S.C. 1097.

which may include tines, imprisonment or both, und	er the U.S. Gomina: Code and 20 U.S.C. 1097.
SECTION 1: BORROWER IDENTIFICATION	- <u></u>
	Pleas (b)(6) check this box: 🗆
	SSN
	Name (b)(6)
	Address _ (b)(6)
	City, State, Zip (b)(6)
•	Telephone - Home ()
	Telephone - Other (
	E-mail address (optional)
SECTION 2: STUDENT INFORMATION	
	tructions and other information on the following page. If you are a student borrower applying for
	yng in a flos idai dispholys, begil will hell i.
1. Student's name (b)(6) 2. Student's SSN:	
3. School's name.	
4. School's address (street, city, state, zip):	
5. Dates of attendance at the school: From -	- To - Dipenol attend
6. Did you sign the application, promissory note, master promissory	note (MPN), or combined application/promissory note for your loan(s)? ☐ Yes ☐ Application ☐ Promissory note ☐ MPN ☐ Combined application/promissory note
7. Did you endorse each loan check or sign your name on each elect	
☐ Yes ☐ No ☐ Does Not Apply	/
If No. did you for, for PLUS borrowers, the student) ever receive a	loan check electronic funds transfer authorization master check authorization money from the school, or did the school ever reduce the amount of money that you (or, for Don't Know If Yes, explain (give dates, amounts, and circumstances);
If No or Don't Know, explain how you (or, for PEUS borrowers, the	e student) naid the tuition and fees owed to the school:
I DID NOT AHEND ANY SYCH	
8. If you answered No to tem 6 or item. 7, do you know who signed	
☐ Yes ☐ No ☐ If Yes, identify the person who signed your name.	
•	
Other person (name):	
Provide any other information about the circumstances under whi	ich another person signed your name:
IMPORTANT: If you did not sign your name on one of the document signature in addition to the signature on this application. At least two after the date of the document on which someone else signad your prignature was written include—but are not limited to—cancelled child considered for a loan discharge.	is listed in item 6 or item 7, you must attach documents containing four other samples of your of these samples must clearly show that your signatures were written within one year before or name. Examples of documents that would include both a signature sample and the date that the ecks, tax returns, and driver's licenses. If you do not provide these signature samples, you cannot
Did the holder of your loan receive any money back (a refund) from If Yes, give the amount and explain why the money was refunded	om the school on your behalf? Yes No So Don't Know
18. Did you (or, for PLUS borrowers, the student) make any monetan	ry claim with, or receive any payment from, the school or any third party (see definition in Section 5) as who Don't Know If yes, please provide the following information:
(b) Amount/status of claim:	(c) Amount of payment received: \$
	(Write "none" if no payment was received.)
SECTION 3: BORROWER CERTIFICATION	
My signature below cartifies that I have read and agree to the terms	and conditions that apply to this loan discharge, as specified in Section 6 on the following page, roylded on this form and in any accompanying documentation is true and accurate to the best of my
Borrower's Signature	Date:
worrough a digitatore _	

SECTION 4: INSTRUCTIONS FOR COMPLETING THE FORM

Type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "January 31, 2002" = "01-31-2002"). If you need more space to answer any of the items, continue on separate sheets of paper and attach them to this form. Indicate the number of the item(s) you are answering and include your name and social security number (SSN) on all attached pages.

Send the completed form and any affachments to the address in Section 8.

SECTION 5: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- The holder of a borrower's FFEL Program loan(s) may be a lender, a guaranty agency, or the U.S. Department of Education (the Department). The holder of a borrower's Direct Loan Program loan(s) is the Department.
- Unauthorized signature means that the school, without the borrower's authorization, signed the borrower's name on a loan application or promissory note.
- Unauthorized payment means that the school, without the borrower's authorization, endorsed the borrower's loan check or signed the borrower's authorization for electronic funds transfer or master check, and did not give the loan proceeds to the borrower or apply the loan proceeds to charges owed by the student to the school.
- Loan discharge due to an unauthorized signature on a loan application or promissory note cancels the obligation of a borrower (and endorser, if applicable) to repay the remaining batance on a FFEL Program or Direct Loan Program loan, and qualifies the borrower for reimbursement of any amounts paid voluntarily or through forced collection on the loan. Discharge due to an unauthorized signature on a loan check, electronic funds transfer authorization, or master check authorization applies only to the amount of the unauthorized payment. For consolidation loans, only the loan amounts associated with the document listed in Section 2, Item 6 or Item 7, will be considered for discharge. The loan holder reports the discharge to all credit reporting agencies to which the holder previously reported the status of the loan.
- The student refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Third party refers to any entity that may provide raimbursement for a refund owed by the school, such as a tuition recovery program or performance bond.

SECTION 6: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- The school identified in Section 2 of this form received FFEL Program or Direct Loan Program loan funds on or after January 1, 1986, for me to attend (or, if I am a PEUS borrower, for the student to attend) the school. I am applying for a discharge of my FFEL Program or Direct Loan Program loan(s) because the loan application, promissory note, master promissory note, combined application/promissory note, loan disbursement check, electronic funds transfer authorization, or master check authorization were not authorized for the reasons stated in this application.
- i will provide, upon request, testimony, a sworn statement, or other documentation reasonably available to me that demonstrates to the satisfaction of the Department or its designee that I meet the qualifications for loan discharge based on unauthorized signature/unauthorized payment, or that supports any representation that I made on this form or on any accompanying documents.
- Lagree to cooperate with the Department or its designee regarding any enforcement actions related to my request for loan discharge.
- I understand that my request for loan discharge may be denied, or my discharge may be revoked, if I fail to provide testimony, a sworm statement, or documentation upon request, or if I provide testimony, a sworm statement, or documentation that does not support the material representations I have made on this form or on any accompanying documents.
- # i (urther understand that if my loan(s) is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable federal law.
- it hereby assign and transfer to the Department any right to a refund on the discharged loan(s) that I may have from the school identified in Section 2 of this form and/or any owners, additiates, or assigns of the school, and from any third party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).

SECTION 7: IMPORTANT NOTICES

Privacy Act Notice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are §428(b)(2)(A) et seq. and §451 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(a) et seq. and 20 U.S.C. 1087a et seq.) and the authority for collecting and using your Social Security Number (SSN) is §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a load or a benefit on a load (such as a deferment, forbearance, discharge, or forgiveness) under the FFEL and/or Direct Load Programs, to permit the servicing of your load(s), and, if it becomes necessary, to locate you and to collect on your load(s) it your load(s) become definquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to educational institutions, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to load you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, coursel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress If you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act sategoards.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0015. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education. Washington, DC 20202-4551

If you have questions regarding the status of your individual submission of this form, confact your loan holder (see Section 8).

SECTION 8: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed toan discharge application and any attachments to: (if no address is shown, return to your loan holder.) If you need help completing this form, call:

(b)(6)

(b)(6)

August 1, 2005

United State Department Of Educations Debt. Collection Services Loan Discharge Applications P.O. Box 422037 San Francisco, California 94142

To Whom It May Concerns:

This is to reiterate that I have not signed any promissory nor have I participated in any of said schools not any loans. I did attend schools at the Passaic Community College, in Paterson NJ, however it was paid for by the state of New Jersey Welfare Program. In 1984 I was a victim of a mugging in the city Of New York however because of the robbery did not include anything of value other than my Social Security card, Driver License birth certificated And my Welfare L.D., the police department only advised to get them replaced at the respective agencies. In the documents my signature although similar but is not my own nor does it match my handwriting.

Again I'm Requesting the return of my hard earned money that I am entitled to. This is a fraud in which I had not part in. I am not the culprit I am the victim.

Sincerely. (b)(6)

SUGGESTIONS ON WHERE TO OBTAIN <u>SIGNATURE SPECIMENS - must be signed and dated</u>

Internal Revenue Service (IRS)

State tax agency

Bankruptcy Court

Other governmental agencies: city/county/state/federal

Associations/Clubs/Memberships/Fraternal Organizations

Union Membership

Banks/Credit Unions: cancelled checks/ promissory notes/

loan agreements/ other personal business/credit application

A contract or business agreement

Current or previous employers:

request for tax withholding/official business letters

Telephone Company

Gas and Electric company

Mortgage Company

Rental agreement

Schools: Registrars Office

Hospital/Clinic/Medical Records

Insurance Companies: life/auto/home/renter's

Attorney/Legal Representative

Family/Personal Records

License: Driver's License/Business License/Other Licenses

Department of Motor Vehicles: Vehicle Registration

Library

Public Assistance

Unemployment Benefits

Birth Certificate of a child

Wedding License

Death Certificate of a loved one



August 9, 2005

United State Department Of Educations Debt. Collection Services Loan Discharge Applications P.O. Box 422037 San Francisco, California 94142

To whom it may concern:

I am Sending the request papers which is 5 items with my signature and also the application the now is completed and a copy of the letter you sent me. I don't have anything to hide hopefully this letters will clear my signature situation. Also I want to let you know that who ever did it also did some debt in my name and thanks the alls those debt came to me and I cleared all. This situation is intolerable.

I'm feel this way why I have to pay for something I didn't do.

(b)(6)



August 4, 2005

(b)(6)

RE: SSN (b)(6) -(b)(6)

Dear (D)

This letter acknowledges receipt of your swom statement requesting discharge of Federal Family Education Loans due to an unauthorized signature.

Your application for loan discharge under the Unauthorized Signature regulations CFR §682.402(e), is being returned to you for the following reasons:

- X Information regarding the school and attendance on the discharge application is incomplete.
- X Student borrowers requesting loan discharge due to the unauthorized endorsement of a promissory note, loan check or electronic funds transfer are required to provide five different authentic specimens of his or her signature, two of which were made within one year of the contested signature. Without the authentic signature specimens, a determination cannot be made regarding the validity of the contested signature.*

Please return the attached discharge application with your signature specimens.

	Section	of the discharge application is illegible.	
x	You did not put a	date on the application	
<u> </u>	Other		ļan.

*If you cannot provide the required signature samples, you may, at your own expense, retain the services of a handwriting expert. If this expert determines that the signature on the contested loan documents is not yours, we will reconsider our decision. The handwriting expert must write to this office on their letterhead and provide a detailed explanation of their analysis.

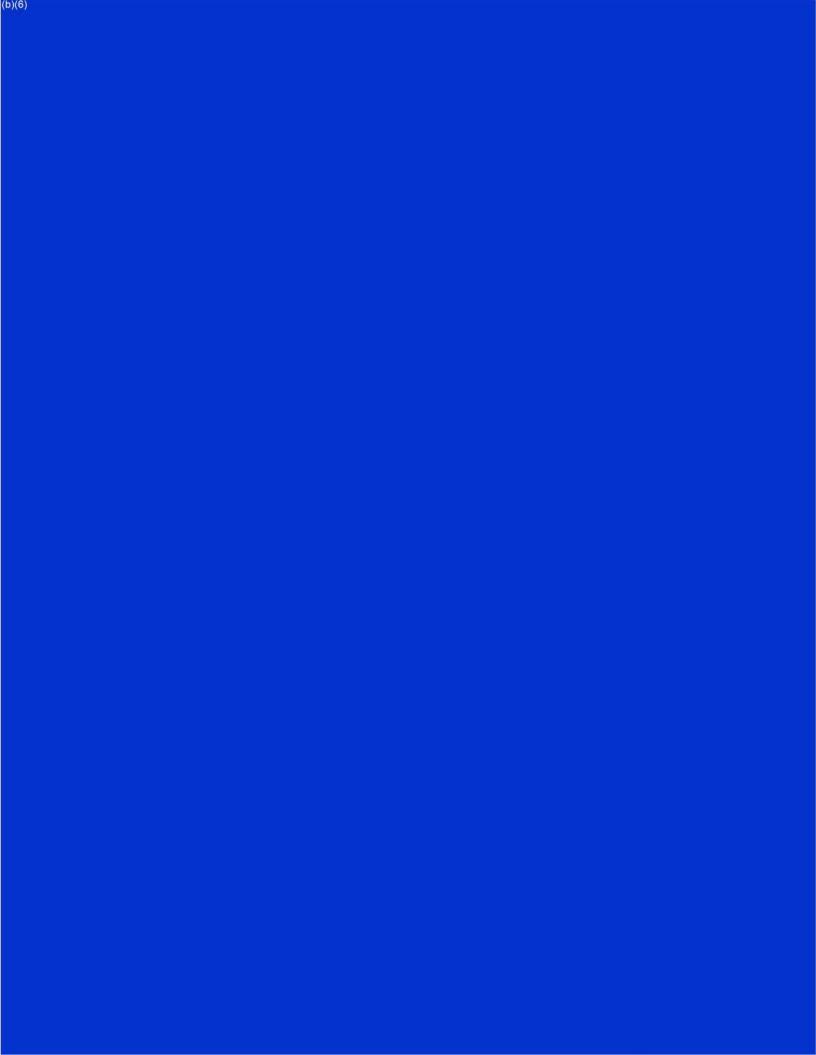
If you have any questions or desire additional assistance please contact our customer service at 1-800-621-3115 or Winnie Guidry, Loan Analyst at (415) 487-5034. Or you may visit the official U.S. Department of Education website at http://www.ed.gov/index.jhtml

Sincerely.

Loan Analyst

Enclosure

50 United Nations Plaza, San Francisco, CA 94102 1-800-621-3115 www.studentaid.ed.gov



IMPORTANT NOTICE TO ALL VOTERS AVISO IMPORTANTE PARA TODOS LOS VOTANTES

It is a felony to vote in a precinct you don't live in. Notify Elections Office of ANY change of name, residence address or party affiliation within Orange County. Your signature is required.

Es un delito votar en un precinto en el cual no vive. Notifique a la Oficina de Elecciones de CUAL QUIER cambio de nombre, dirección residencial o afiliación política dentro del Condado de Orange. Su firma es un requisito.

BILL COWLES SUPERVISOR OF ELECTIONS P.O. BOX 562001 ORLANDO, FL 32858 407-836-2070

BILL COWLES

Orange County Supervisor of Elections



VOTER IDENTIFICATION CARD TARJETA DE IDENTIFICACIÓN DEL VOTANTE

This is an information card only, not a valid identification for other purposes, it is NOT needed to vote, nor is it an authorization to vote.

Esta terjeta sólo sirve para proveer información. No debe utilizarlo como una forma de identificación. No necesita la tarjeta pera poder votar. La terjeta no le da eutorización para votar.



COUNTY PREC		337		
CONGRESS CONGRESO	FL SENATE SENADO ESTATAL	FL HOUSE CÁMARA ESTATAL	CONDADO	SCHOOL JUNTA DE EDUCACIÓN
24	24	35	3	1

Polling Place Information: Sample ballots mailed with map/directions prior to election and at www.ocfelections.com. Listed in newspapers prior to election day. Información sobre los Centros de Votación Temprana: Papelotas de muestra son enviadas por correo con un mapa/direcciones antes de las elecciones y están disponibles por internet www.ocfelections.com. Tambien habra una lista en el periódico antes de las elecciones.

(b)(6)

(b)(6)

REPUBLICAN

Printed 06/21/2004

(b)(6)

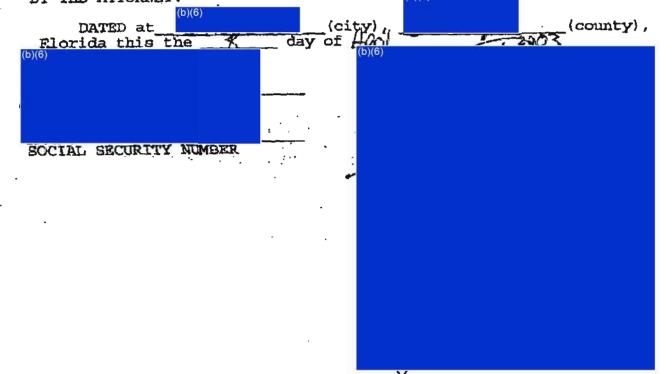
SIGNATURE

FIRMA



- 6. In the event the attorney is required to bring any formal action against me for collection of fees or costs, I agree to pay a reasonable attorney's fee plus costs and lawful interest on said debt incurred in the litigation for collection thereof.
- 7. I acknowledge the duty to keep The Law Offices of JAMES RICHARD HOOPER, P.A. informed of all changes of address and agree that all obligations of The Law Offices of JAMES RICHARD HOOPER, P.A. shall be satisfied by sending any notices to the last address provided in writing by said client. I further understand that, IF I fail to comply, The Law Offices of JAMES RICHARD HOOPER, P.A. is hereby authorized, at any time, with their sole discretion, to withdraw as my representative immediately upon giving notice to the agency which is processing my claim at that particular time.
 - 8. We have both received signed copies of this agreement.

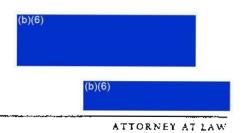
9. THE CLAIMANT ACKNOWLEDGED THAT NO GUARANTEE AS TO THE ULTIMATE SUCCESS OR OUTCOME OF THIS REPRESENTATION HAS BEEN MADE BY THE ATTORNEY. (b)(6)



IT IS IMPORTANT THAT YOU CAREFULLY READ AND FOLLOW THE INSTRUCTIONS ON THIS SHEET

GENERAL INSTRUCTIONS:	ADDITIONAL INSTRUCTIONS: None
◆ Anesthetics and other medications you received may make you feel lightheaded, dizzy or sleepy, and may also affect your judgment following your procedure. This feeling will slowly wear off, but for at least 24 yours after discharge:	REQUIRED AT EAST ORLANDO 1. Change dressing in days.
DO NOT drive a motor vehicle; operate heavy machinery or power tools	Rest at home
b. DO NOT drink alcoholic beverages (including beer). C. DO NOT make any important business decisions or sign legal papers.	4. Bath / Shower: N/A After seen by physician Return to normal in days.
d. <u>TAKE</u> medication(s) as directed by your pharmacist. e. <u>IF A CHILD:</u> 1. NO bike riding, skateboards, playing on	
gym sets, or any other activity that may be harmful. 2. for the ride home today have child strapped in a car seat or in a seat belt.	
 Progress slowly to regular diet as tolerated. It is better to start with liquids such as ginger me or apple juice, then soup and crackers and gradually solid foods. 	Physician Signature (only if additional leatrucipes given by physician) Follow up visit with Dr.
 Certain anesthetics and pain medication may produce nausea and vomiting. If nausea becomes a problem, call your physician. 	Office number: Call office for an appointment @ in days / wk Scheduled follow up visit:
Call your physician for:	DATE: AM/PM
Excessive drainage or bleeding.	If any questions, call:
 Increase in temperature (101 or higher), and / or increase in pain or foul drainage odor. These symptoms of infection usually become apparent in 36 - 48 hours. 	□ N / A □ Yes □ No PERSONAL MEDS RETURNED □ N / A □ Yes □ No VALUABLES RETURNED May we contact you ster discharge? □ No □ Yes
Any difficulty with breathing.	Phone number at which you can be reached between 9e.m. and 5 p.m.
Pain not relieved by prescribed medication.	
As you agreed at admission, a responsible person will be present or avi if any problems occur or if you have any further questions, you or the re IF THE PHYSICIAN CANNOT BE REACHED, or you or the responsible NEAREST EMERGENCY ROOM for evaluation and treatment or, if 911	sponsible parson should CONTAGT THE PHYSICIAN MINISPRIATELY. person feel a physician's attention is needed immediately, GO TO THE
☐ PATENT / ☐ RESPONSIBLE PERSON:	(b)(6)
☐ HAVE READ THE ABOVE INSTRUCTIONS. ☐ ALL QUESTIONS HAVE BEEN ANSWERED TO MY / OUR SAT	ISFACTION. PATIENT / I RESPONSIBLE PERSON SIGNATURE
☐ CORRECTLY RESTATES INSTRUCTIONS / TEACHING.☐ CORRECTLY RETURNS DEMONSTRATION.☐ RECEIVED COPY OF DISCHARGE INSTRUCTIONS.	PRINT NAME / RELATIONSHIP
N/A Yes PRESCRIPTION AND COPY OF PATIENT COUNSELING: DRUS NFORMATION GIVEN / TO PATIENT / RESPONSES. N/A Yes HAVE RECEIVED ADDITIONAL INSTRUCTIONS FROM MY DO	
FLORIDA OUTPATIENT SURGICAL / HOSPITAL PROCEDURAL DISCHARGE 482-0003/7-00/bb/MPC#184) UNSTRUCTIONS	





AUTHORITY TO REPRESENT

I HEREBY retain the firm of Attorneys Trial Group, as my attorneys to prosecute any and all claims for Personal Injury Protection (PIP) benefits against: STATE FARM as a result of injuries received in an automobile accident on or about the 16 day of December 2003.

IT IS UNDERSTOOD that the law firm of Attorneys Trial Group, is entitled to a reasonable fee for their services rendered to me in the prosecution of my claim. IT IS AGREED that the representation by Attorneys Trial Group, is based on a contingency fee agreement, which entitles Attorneys Trial Group, to attorney's fees pursuant to Florida Statute Section 627.428: said fees are payable only if they are successful in the prosecution of this claim.

IT IS AGREED that I will reimburse the law firm of Attorneys Trial Group, for the costs, plus interest, not reimbursed by my Personal Injury Protection (PIP) carrier. I acknowledge and agree that my attorneys may borrow funds from time to time to pay the costs referred to above and agree that, in addition to reimbursing them for the amount of such costs, I also will reimburse them for any interest charges and related expenses they incur in connection with such borrowings.

DATED this 2 day of January ,2004.



PLEASE REFER TO GUIDELINES BELOW FOR FOLLOW-UP

You have been given the patient information sheets checked below. These provide information and instructions to help you better understand your illness and follow-up care. Please read carefully and let us know if you have any questions.

Abscess Cellulitis Fever (peds) Kidney stone Stormatitis Abdominal pain (adult) Chest pain Febrile Seizures Lice Swimmers ear Abdominal pain (peds) Chest wall pain Fracture/sprain Middle ear infection Thrush Thrush Allergic reactions Chickenpox Gastritis/ heartburn Miscarriage Upper respiratory is Mis	egnant t peds) aduit)			
Important: You have been treated on an emergency basis. This is not a substitute for complete medical care. Follow-up is essent	ial.			
Follow-up Instructions: Call your Primary eare doctor for follow-up. See your doctor or get referral to appropriate specialist, if none,				
See Dr				
Diameter Dia				
Phone number: When?				
An appointment was not made. You will need to call the doctors office. Call today or as soon as possible for an appointment.				
Tell them at the doctor's office that you were seen in the Emergency Department. Contact us if you are having problems with follow-up.				
Your doctor may wish to see your x-rays or test results. Please inquire about this when making your appointment.				
Return immediately to Emergency Department if condition worsens (i.e. pain, vomiting, bleeding, fever, trouble				
breathing).				
Cultures may have been obtained and results should be available in 3 days. Call the Emergency Dept. for results.				
☐ Suture/staple removal in				
Medications: Your have been given the following prescription listed below. Follow the prescription instructions.				
Local parts				
Starten =	- 1			
Medications may cause drowsiness ******* Do not drive or participate in hazardous activity				
Notice: X-ray's, EKG's, and cultures results are reviewed and become official after you leave. You will be notified if final results vary from what you were told. Please be sure we have your correct local phone number and address.				
Additional Instructions:	<i>?</i>			
the state of the s	C_{γ}			
STATE OF THE STATE	<u></u> -			
Do you have any religious/cultural practices, which may alter your care or education?				
☐Yes ☐No Describe if yes:				
I have been given the above instructions, understand them, and have been given a copy of the above. I may call the Emergency department at any time should I have questions or need further assistance. Do not sign if you do not understand the above instructions or have not received the above instruction sheets or prescriptions.				
X (Partient or authorized signature). Interpreter used, verbal instructions given by:				
) · ·	į			
promotions already by followers at	\dashv			
structions given by (signature): \(\) \(
FLORIDA HOSPITAL EMERGENCY DEPARTMENTS				
☐ Altamonte (407) 303-2230 ☐ East Orlande (407) 281-8667 ☐ ₩inter Park (407) 646-7320				
☐ Apopka (407) 889-1032 ☐ Kissimmee (407) 933-6632				
☐ Celebration Health(407) 303-4034 ☐ Orlando (407) 303-1940				



EMERGENCY DEPARTMENT DISCHARGE INSTRUCTIONS

Part of permanent record/original with chart/copy with patient

678-0195(4-02)MPC#90186(Ish)

(b)(6)

Lease Agreement

b)(6)			
Mailing Address:	(b)(6)		
TUIC INTERITS	RE made and entered into this	25 day of January 7003	he and between (b)(6)
(D)(O)	Hereinafter referred to as I ANI	ORD and (b)(6)	

Description:

WHEREFORE, for and in consideration of the mutual covenants contained herein, the parties hereto agree as follows:

The LANDLORD and/or Owner hereby leases or rents to the TENANT the following described Premises (b)(6)

Term: The initial term of this agreement shall begin <u>February 1, 2003</u> and end on <u>March 31, 2004</u> at the agreed gross rental (together with any all sales and/or governmentally imposed taxes that may become due and payable) in the amount of:

Rent: \$ 9840.00 , payable as follows:

\$ 820.00 due on or before the 1st day each calendar month for the duration of the Lease, payable to the LANDLORD starting February 1, 2003

Late Payments and Returned Checks:

Time is of the essence! The rent amount stated above is discounted rent and is due and payable ON OR BEFORE the !" day of each calendar month. THEREFORE, if rent is not received in the offices or by mail by the (!") day of each month that rent is due, TENANT agrees that the rent amount of \$860.00 _____ becomes due and payable. Any Check returned by the bank for nonpayment will not resubmitted and MUST BE REPLACED IMMEDIATELY by Money Order, Certified Check, Cashier's Check or Cash together with payment of a \$20.00 NSF fee, plus applicable tax. Also the rent will automatically be considered late and the additional late amount shown above will apply. Should more than one check be returned for nonpayment during the term of the tenancy, all payments of rent, etc., from that time forward shall be paid ONLY In the form of Money Order, Certified Check, Cashier's Check or Cash.

Quiet Enjoyment

The LANDLORD and/or Owner covenants with the TENANT that the TENANT upon paying the rent when due as aforesaid, shall peaceably and quietly use, occupy and posses said premises for the full term of this Lease Agreement without let, hindrance, eviction, molestation or interruption whatever, except as provided below, and said TENANT covenants with LANDLORD as follows:

TENANT Agrees:

- To pay said rent when due pursuant to the terms of this Lease Agreement.
- B. To comply with all obligations imposed upon TENANT by applicable provisions of building, housing and health codes.
- C. To keep that part of the premises which he uses and occupies in a clean and sanitary condition.
- D. To remove from the dwelling unit all garbage and debris in a clean and sanitary manner, placing same in appropriate receptacles, and to comply with all present and future laws, orders and regulations of all present and future laws, orders and regulations of all state, federal, municipal and local governments, departments, commissions and boards regarding the collection, sorting, separation and recycling of waste products, garbage, refuse and trash. TENANT agrees to sort and separate such items into categories as provided by law, and in accordance with the rules and regulations adopted by LANDLORD for the sorting and separation of such designated recycle material. TENANT agrees to pay all costs, expenses, fines, penalties or damages imposed on TENANT, LANDLORD or Owner by reason of TENANT'S failure to comply with this paragraph



This instrument has been prepared by the Owner.

In witness whereof, the parties hereto have caused their hands and seals to be affixed on the date first written above.

(b)(6) As To Tenant: Lic. # (b)(6)	LANDLORD: (b)(6) Owner:	
Lic.#	(b)(6) Owner	
As To Tenant: Lic. #	(b)(6)	

(b)(6)



LOAN DISCHARGE APPLICATION: SCHOOL CLOSURE

OMB No. 1845-0015 Form Approved Exp. Date 08/31/2006

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program / Federal Perkins Loan Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to negative units by include fines imprisonment or both production of the Company Could and 2011 S.C. (1997).

penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.	
SECTION 1: BORROWER IDENTIFICATION	
Please enter or correct the following information.	
SSN (D)(6)	
Name (b)(6)	
Address (b)(6)	
City, State, Zip	
Telephone - Home	
Telephone – Other ((b)(6)	
e-mai (dpilonai)	<u>-</u>
SECTION 2: STUDENT INFORMATION	
Before completing this section, carefully read the entire form, including the instructions, definitions, and terms and conditions in Sections form. If you are a student borrower applying for a PLUS loan	
Item 1. (b)(6)	, orderinge, begin with
1. Student's name time finet finet middle initials:	
(b)(6)	
2. Student's SSN:	_
3. Closed school's name: ROBPH Fiance Hair Drugn 007515. 4. Date school closed (if known): -	00
4. Date school closed (if known):	
7475 6 10 100 100 14	10468
5. Closed school's address (street, city, state, zip): 24.35 6 ran concourse Byont 19	7-7-0
8. Dates of attendance at the closed school. From 0 5 - 1 / - 1 9 8 7 To 0 6 - 1 5 - 1 9 8	1_4
7. Name of the program of study that you (or, for PLUS borrowers, the student) were enrolled in at the time the school closed: Hair I	Design
B. Did you (or, for PLUS borrowers, the student) complete the program of study at the closed school? ☐ Yes If No, check all reasons that apply:	•
The school closed while you (or, for PLUS borrowers, the student) were still enrolled.	
You (or, for PLUS borrowers, the student) withdrew from the school on:	
You (or, for PEUS borrowers, the student) were on an approved leave of absence when the school closed:	
Control for FDC 5 borrowers, the stepenty ware on an approved leave or absence which the solidar dissect.	
From	
Other (please explain):	
9. Old you (qr. for PLUS borrowers, the student) complete or are you in the process of completing the program of study or a comparable program of [] Yes QVo If Yes, complete Item a) and b) below:	study at another school?
a) Did the other school give you (or, for PLUS borrowers, the student) credit for training received at the closed school by allowing transfer of cithe closed school, or by any other means? Yes No	redits or hours earned at
b) Were you (or, for PLUS borrowers, the student) required to start the program of study over from the beginning at the other school? 🗀 Yes	□ No
10. Did the holder of your loan receive any money back (a refund) from the school on your behalf? Yes Yes Don't Know If Yes, give the amount and explain why the money was refunded:	
11. Did you (or, for PLUS borrowers, the student) make any monetary claim with, or receive any payment from, the school or any third party (see de connection with enrollment or attendance at the school? Yes Don't Know if Yes, please provide the following information:	afinition in Section 5) in
(a) Name/address/telephone number of the party with whom the claim was made or from whom payment was received:	
(b) Amount/status of claim: (c) Amount of payment received: \$ (Wite "none" if no payment was received.)	
SECTION 3: BORROWER CERTIFICATION	
My signature below certifies that I have read and agree to the terms and conditions that apply to this toan discharge, as specified in Section 5 on the	following ascs
My signature below certines that I have read and agree to the terms and conditions that apply to this loan discharge, as specified in Section 4 bit the Under penalty of perjury, I certify that all of the information I have provided on this form and in any accompanying documentation is true and accurate my knowledge and belief (b)(6)	
$- \alpha \times (30)$	
Berrower's Signature:	

Undergrad Xpress Loan MASTER PROMISSORY NOTE

J. NOTICES

1.1 will send written notice to you, or any subsequent holder of this Note, within ten days after any change in my name, address, or college enrollment status.

2. Any notice required to be given to me by you will be effective when mailed by first class mail to the latest address you have for me. Unless required by applicable law, you need not give a greating official to be enforced in the sections of the sections. separate notice to the cosigner, if any K. PRIVACY

You may report information about my account to credit bureaus, Late payments, missed payments or other defaults on my account may be reflected in my credit report.
 I must update the information on my Application whenever you ask me to do so.
 I authorize you from time to time to request and receive from others credit related

information about me (and about my spouse if I live in a community property state).

L. ADDITIONAL AGREEMENTS

I understand that you are located in Obio and that this Note will be entered into in the same state. CONSEQUENTLY, THE PROVISIONS OF THIS NOTE WILL BE COVERNED BY FEDERAL LAW AND OHIO LAW, WITHOUT REGARD TO CONFLICT OF LAW BULES.

2. The proceeds of this foan will be used only for my educational expenses at the school listed on the Application. The Cosigner, if any, will not receive any of the loan proceeds.

3. I understand that I must repay this Note though I may be less than 18 years of age when the

- 3. I understand that I must repay this Note though I may be less than 18 years of age when the Application is signed.

 4. My responsibility for paying this Note is unaffected by the liability of any other person to me or by your failure to notify me that a required payment has not been made. You may delay, fall to exercise, or waire any of your rights on any occasion without losing your entitlement to exercise the right at any future time, or on any future occasion. You will not be obligated to make any demand upon me, send me any notice, present this Note to me for payment or make protest of non-payment so me before suing to collect on this Note if I am in default, and to the extent permitted by applicable law, I hereby waive any right I might otherwise have to require such actions. Without losing any of your rights under this Note, you may accept late payments on partial payments. I WILL NOT SEND YOU PARTIAL PAYMENTS MARKED "PAID IN FLLT." "WITHOUT RECOURSE" OR WITH OTHER SIMILAR LANGUAGE UNLESS THOSE PAYMENTS ARE MARKED FOR SPECIAL HANDLENG AND SENT TO AMERICAN EDUCATION SERVICES, PO BOX 2251, FARRISBURG, PA 17105-2251 OR TO SUCII OTHER ADDRESS AS I MAY BE GIVEN IN THE FUTURE.
- 5. I may not assign this Note or any of its benefits or obligations. You may assign this Note at
- 6. The terms and conditions set forth in my Note constitute the entire agreement between you and me.
 7. If any provision of this Note is held invalid or unenforceable, that provision shall be considered omitted from this Note without affecting the validity or enforceability of the remainder of this Note.

8. A provision of this Note may only be modified if jointly agreed upon in writing by you and me.

Any modification will not affect the validity or enforceability of the remainder of this Note.

I authorize any school that I may after d to release to other persons designated by you, any requested information pertinent to this loan (e.g. enrollment status, prior loan history, and

current address).

10. Lauthorize my lender, subsequent holder, or their agents to: (1) advise my school of the status of my Application. (2) respond to Inquiries from prior or subsequent lenders or holders with respect to my Note and related documents, (3) release information and make inquiries to the persons I have listed in my loan Application as references, for the purposes of learning my current address and telephone number, (4) check my credit and employment history and to answer questions about their credit experience with me.

11. Waiver by Lender. You waive (give up) any right to claim a security interest in any property to excert his Note. This does not affect any right to offset as a matter of law.

12. Dischargeability: I acknowledge that my loan is made pursuant to an education loan.

12. Dischargeability: I acknowledge that my loan is made pursuant to an education loan program that is funded in whole or in part by the lattheran Education Assistance Resource Network, a non-profit corporation. I therefore understand that my loan may be subject to the limitations on dischargeability in bankruptcy established by Section 523(a)(8) of the U.S.

M. BORROWER'S CERTIFICATION

M. BORROWER'S CERCIFICATION
I declare under penalty of perjury under the laws of the United States of America that the following is true and correct. I, certify that the information contained in my Application and Note is true, complete and correct to the best of my knowledge and belief and is made in good faith. I certify that the proceeds of this loan will be used for educational purposes for the academic period stated in my loan Application at the school named on the Application. I understand that I an responsible for repaying immediately any funds that I receive which are not to be used or are not used for educational expenses related to attendance at the school incert the academic period is true.

ior the academic period stated.

N. STATE DISCLOSURE NOTICES

IN STATE OF SELECTION OF THESE STATES AND MAY BE ENTITLED TO A REFUND OF UNDERSORD. CHARGES IN ACCORDANCE WITH LAW.

CALIFORNIA RESIDENTS: I have the right to prohibit the use of information contained in my credit file in connection with transactions not initiated by me. I may exercise this right by notifying the consumer credit reporting agency. A married applicant may apply for a separate account. If you take any adverse action as defined by Section 1785.3 of the California Crid Code and the adverse action is based, in whole or in part, on any information contained in a consumer credit report, I have the right to obtain within 60 days a free copy of my consumer credit report, from the consumer credit report from the consumer credit.

consumer credit report, I have the right to obtain within 60 days a free copy of my consumer credit report from the consumer credit reporting agency who furnished you my consumer credit report and from any other consumer credit reporting agency which compiles and maintains files on consumers or a nationwide basis. I have the right as described by Section 1785.16 of the California Civil Code to dispute the accuracy or completeness of any information in a consumer credit report furnished by the consumer credit reporting agency. NEW YORK, RHODE ISLAND AND VERMONT RESIDENTS: A consumer report (credit report) may be obtained from a consumer reporting agency (credit burreat) in connection with this ioan. If I reports were obtained, and (2) if reports were obtained,) will be informed in the names and addresses of the credit burcaus that furnished the reports. If you agree to make this loan to me, a Consumer credit for record may be requested or used in connection with repressions of any credit for report may be requested or used in connection with renewals or extensions of any credit for which I have applied, reviewing my loan, taking collection action on my loan, or legitimate purposes associated with my loan.

MISSOURI RESIDENTS: Oral agreements or commitments to loan money, extend credit or to forbear from enforcing repayment of a debt including promises to extend or renew such debt are not enforceable. To protect me (borrower(s)) and you (creditor) from misunderstanding or disappointment, any agreements we reach covering such matters are contained in this writing, which is the complete and exclusive statement of the agreement between us, except as we may later agree in writing to modify it.

MEVADA RESIDENTS: This is a loan for study.

OHIO RESIDENTS: The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission

separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law. WISCONSIN RESIDENTS: For married Wisconsin residents, my signature on this Note confirms that this loan obligation is being incurred in the interest of my marriage or family. No provision of any marrial property agreement (pre-martial agreement), unitateral statement under Section 766.59 or court decree under Section 766.70 adversely affects the interest of the Lender unless the Lender, proor to the time that the loan is approved, is furnished with a copy of the agreement, statement, or decree or has actual knowledge of the adverse provision when the obligation to the Lender is incurred. If the loan for which I am applying is granted, my spouse will also receive notification that credit has been extended to me.

NEW JERSITY RESIDENTS: The section beadings of this Note are a table of contents and not contract terms. Portions of this Note with references to actions taken to the extend applicable law apoly to acts or practices that New Jersey law nermits or requires. In extent Note.

applicable law apply to acts or practices that New Jersey law permits or requires. In this Note, acts or practices (i) by you which are or may be permitted by "applicable law" are permitted by New Jersey law, and (ii) that may or will be taken by you unless prohibited by "applicable

law" are permitted by New Jersey law.

O. STATE-SPECIFIC COSIGNER NOTICES:

For the purposes of the following notices only, the words "you" and "your" refer to the Cosigner, where applicable, not to the lender. FOR OBUGORS COSIGNING IN WEST VIRGUELA NOTICE TO COSIGNER:

FOR OBLIGORS COSIGNING IN WEST YREGISTA: NOTICE TO COSIGNER: You are being asked to guarantee this debt. Think carefully before you do. If the borrower doesn't pay the debt, you will have to. Be sure you can afford to pay it if you have to, and that you want to accept this responsibility. You may have to pay use fees or collection costs, which increase this amount. The creditor can collect this debt from you without first trying to collect from the borrower. The creditor can collect this debt from you without first trying to collect from the borrower. The creditor can use the same collection methods against you that can be used against the borrower, such as suing you, garoisting your wages, etc. If this debt is ever in default, that fact may become a part of your credit record. This notice is not the contract that makes you liable for the debt.

FOR OBLIGORS COSIGNING IN IOWA, NEW YORK AND SOUTH CAROLINA: NOTICE TO FOR OBLIGORS COSIGNING IN 10WA, NEW YORK AND SOUTH CAROLINA. NOTICE TO COSIGNER: You agree to pay the debt identified below although you may not personally receive any property, goods, services or money. You may be sued for payment although the person who receives the property, goods, services, or money is able to pay. You should know that the Total of Payments listed below diese not include finance charges resulting from delinquency, tate charges, repossession or foreclosure costs, court costs or automery's fees, or other charges that may be stated in the Note or contract. You will also have to pay some or all of these costs and charges if the Note or contract, the payment of which you are guaranteeing requires the borrower to pay such costs and charges. This notice is not the Note or contract that obligates you to pay the debt. Read the Note or contract for the exact terms of your obligation.

IDENTIFICATION OF DEBT(S) YOU MAY HAVE TO PAY

Mame of Debtor: The Borrower and Cosigner Identified on the first page of this Note.

Name of Creditor: Liberty Bank, N.A., and its successors and assigns.

Date: If the loan is disbursed by check, the date of the check. If the loan is disbursed electronically, the date the creditor transmits the funds to the School.

electrosically, the date the creditor transmits the funds to the School. Nind of Debt: Education loan.

Total of Payments: The Loan Amount Requested set forth on the Brst page of this Note (to the extent advanced), plus interest and the Loan Origination Fee set forth in this Note. FOR OBLIGUES COSIGNING BY VERMONT: NOTICE TO COSIGNER:

YOUR SIGNATURE ON THIS APPLICATION/PROMISSORY NOTE MEANS THAT YOU ARE EQUALLY LIABLE FOR REPAYMENT OF THIS LOAN. IF THE BORROWER DOES NOT PAY, THE LENDER HAS A LIGAL RIGHT TO COLLECT FROM YOU.

FOR OBLIGUES COSIGNING IN CALIFORNIA: NOTICE TO COSIGNER (Traduccion en Ingles Se Recuirer Por La Ley).

Se Requiere Por La Ley):
You are being asked to guarantee this debt. Think carefully before you do. If the borrower doesn't pay the debt, you will have to. Be sure you can afford to pay if you have to, and that

you want to accept this responsibility.

You may have to pay up to the full zmount of the debt if the borrower does not pay. You may also have to pay up to the full zmount of the debt if the borrower does not pay. You may also have to pay late fees or collection costs, which increase this amount. The holder of the loan can collect this debt from you without first trying to collect from the borrower. The holder of the loan can use the same collection methods against you that can be used against the holder of the loan can use the same collection methods against you that can be used against. the borrower, such as suing you, garnishing your wages, etc. If this debt is ever in default, that fact may become part of your credit record.

This notice is not the contract that makes you liable for the debt.

AVISO PARA EL FIADOR (Spanish Translation Required by Law):

Se le está pidiendo que garantice esta deuda. Piensedo con cuidado antes de ponerse de acuerdo. Si la persona que ha pedido este préstamo no paga la deuda, usted tendrá que pagarla. Esté seguro de que usted podrá pagar si sea obligado a pagarla y de que usted desea aceptar la responsabilidad

St la persona que ha pedido el préstamo no paga la deuda, es posible que usted tenga que pagar la suma total de la deuda, mas los cargos por tardarse en el pago o el costo de cobranza, lo cual aumenta el total de esta suma.

cooranta, in cua aumenta e nota de esta sinta.

El acrector (financiero) puede cubrarle a usted sin, primeramente, tratar de cobrarle al deudor. Les mismos metodos de cobranza que pueden usarse contra el deudor, podran usarse contra usted, tales como presentar una demanda en corte, quitar parte de su sueldo, etc. Si alguna vez no se cumpla con la obligación de pagar esta deuda, se puede incluir esa información en la historia de credito de usted.

Este aviso no es el contrato mismo en que se le echa a usted la responsibilidad de la deuda.



LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to panalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1997.

SECTION 1: BORROWER IDENTIFICATION	
	Please enter or correct the following information:
CEIVED	(b)(6) (b)(6)
	Name (0)(0)
	Address (b)(6)
L 0 9 2007	City, State, Zip : (b)(6)
	Talephone - Ham
DIVISION	Telephone Other (
DIVIDIOIS	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
owes you a refund is currently open, you should first contact the sch	Instructions and other information on the following page. If the school that you believe gol to attempt to resolve this issue before applying for an unpaid refund loan discharge. If you 3s. If you are a parent borrower applying for a PLUS loan discharge, begin with Item 1.
1. Student's nam (b)(6)	2. Student's SSN:
3. School's name: Robert France	3b. School's address (street, city, state, zip): Willowah by AVE BRYN NY, 11205
4. is this school still open? ☐ Yes ☑ No ☐ Don't Know	 5. If this school is closed, were you (or, for PLUS borrowers, was the student) attending the school when it closed? Yes Yes
6. Do you have any other pending or approved application(s) for dis	
requesting a discharge, or is such a refund or payment being co	
for each discharge, refund or payment, if known. Use a separate	your answer to item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7 is sheet of paper if you need to report more than one discharge, refund or payment.
7a, Reason for discharge, refund or payment:	
7b. From whom did you request the discharge, refund or payment (ii	nclude telephone number)?
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
7c. Amount you received or that you expect to receive: \$	·
SECTION 3: REFUND INFORMATION	
Have been demonstrately from the name of showing the amount	
shown in the documentation from the school is correct, skip to Section	nt of the unpaid refund, attach a copy to this form. If you believe that the amount of the refur on 4. If you don't believe that the amount is correct or if you don't have this documentation, a requested information, with TOOT Know.
shown in the documentation from the school is correct, skip to Section complete Items 8 through 13. If you are unable to provide any of the	on 4. If you don't believe that the amount is correct or if you don't have this documentation,
shown in the documentation from the school is correct, skip to Section complete Items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you?	on 4. If you don't believe that the amount is correct or if you don't have this documentation,
shown in the documentation from the school is correct, skip to Section complete Items 8 through 13. If you are unable to provide any of the	on 4. If you don't believe that the amount is correct or if you don't have this documentation,
shown in the documentation from the school is correct, skip to Section complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount?	on 4. If you don't believe that the amount is correct or if you don't have this documentation, a requested information, write "Don't Know."
shown in the documentation from the school is correct, skip to Section complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates of	on 4. If you don't believe that the amount is correct or if you don't have this documentation, a requested information, write "Don't Know."
shown in the documentation from the school is correct, skip to Section complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates on the school owes you this amount?	on 4. If you don't believe that the amount is correct or if you don't have this documentation, a requested information, write "Don't Know." of attendance at the school:
shown in the documentation from the school is correct, skip to Section complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates on the school owes you this amount?	on 4. If you don't believe that the amount is correct or if you don't have this documentation, a requested information, write "Don't Know." of attendance at the school:
Shown in the documentation from the school is correct, skip to Sectic complete Items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates on the student's program of study at 11. Your (or, for PLUS borrowers, the student's) program of study at 12. Items 12a and 12b request information about the amount of the which the loan was intended. For example, if you received a loan for the winter that quarter only. However, if you received a loan for the winter that the student's program of the winter that quarter only.	on 4. If you don't believe that the amount is correct or if you don't have this documentation, a requested information, write "Don't Know." of attendance at the school:
shown in the documentation from the school is correct, skip to Section complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for Pt.US borrowers, the student's) first and last dates on the student's interest in the student's interest in the student's interest in the student's interest in the student's interest in the student's interest int	on 4. If you don't believe that the amount is correct or if you don't have this documentation, a requested information, write "Don't Know." of attendance at the school:
shown in the documentation from the school is correct, skip to Sectic complete Items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PtUS borrowers, the student's) first and last dates of the your (or, for PtUS borrowers, the student's) program of study at 12. Items 12a and 12b request information about the amount of the which the loan was intended. For example, if you received a loan that quarter only. However, if you received a loan for the winter than one loan and the loans were for different periods of enrolling a separate sheet of paper for your additional response(s). 12a. If your (or, for PtUS borrowers, the student's) last date of atter enrollment for which the loan was intended. Include turion, let	of attendance at the school: OR _ Never Attended
shown in the documentation from the school is correct, skip to Sectic complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates of the student's of the student's of the student's of the which the loan was intended. For example, if you received a loan for the winter than one loan and the loans were for different periods of enrolling using a separate sheet of paper for your additional response(s). 12a. If your (or, for PLUS borrowers, the student's) last date of atternormal enrollment for which the loan was intended. Include turion, let 12b. If your (or, for PLUS borrowers, the student's) ast date of atternoewhed for any part of the period of enrollment for which the last of	of attendance at the school:
shown in the documentation from the school is correct, skip to Sectic complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates of the school owes you this amount? 11. Your (or, for PLUS borrowers, the student's) program of study at 12. Items 12a and 12b request information about the amount of the which the loan was intended. For example, if you received a load that quarter only. However, if you received a load for the winter than one loan and the loans were for different periods of enrolling using a separate sheet of paper for your additional response(s). 12a. If your (or, for PLUS borrowers, the student's) last date of atterned the student of the which the loan was intended. Include tuition late the student of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any part of the period of enrollment for which the interviewed for any pa	of attendance at the school:
shown in the documentation from the school is correct, skip to Sectic complete Items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates of the control of the which the loan was intended. For example, if you received a loan for the winter than one loan and the loans were for different periods of enrolling using a separate sheet of paper for your additional response(s). 12a. If your (or, for PLUS borrowers, the student's) last date of atternollment for which the loan was intended. Include tuition, let the control of the contr	of attendance at the school:
shown in the documentation from the school is correct, skip to Sectic complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for Pt.US borrowers, the student's) first and last dates on the student's intermation about in the student's intermation about in the student's intermation about in the student's intermation about in the student's intermation about in the student's intermation about it is intermation about in the student's intermation about it is intermation about intermation about intermation about it is intermediate the student's intermation about it is intermediate the student's intermation about it is intermediate.	of attendance at the school:
shown in the documentation from the school is correct, skip to Sectic complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates of the school ower you this amount? 11. Your (or, for PLUS borrowers, the student's) program of study at 12. Items 12a and 12b request information about the amount of the which the loan was intended. For example, if you received a loan for the which the loan was intended. For example, if you received a loan for the winter than one loan and the loans were for different periods of enrolling using a separate sheet of paper for your additional response(s). 12a. If your (or, for PLUS borrowers, the student's) last date of atterneoliment for which the loan was intended. Include tuition, let 12b. If your (or, for PLUS borrowers, the student's) ast date of atterneoliment for any part of the period of enrollment for which the loan was intended. Include tuition, let 13. Attach a copy of any documentation that supports your responsional school's catalog, refund policy, tuition bill(s), enrollment contract correspondence from the school that contains information about SECTION 4: BORROWER CERTIFICATION My signature below certifies that— 1 received each loan for which I am requesting a discharge on my (or, for PLUS borrowers, the student's) school account to p I (or, for PLUS borrowers, the student) did not attend the school refund of some or all of my loan funds. Except as explained in entitled, from the school or any third party. 1 have read and agree to the terms and conditions for loan disc	of attendance at the school:
shown in the documentation from the school is correct, skip to Sectic complete items 8 through 13. If you are unable to provide any of the 8. What amount do you believe the school owes you? 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates of the school ower you this amount? 11. Your (or, for PLUS borrowers, the student's) program of study at 12. Items 12a and 12b request information about the amount of the which the loan was intended. For example, if you received a loan for the which the loan was intended. For example, if you received a loan for the winter than one loan and the loans were for different periods of enrolling using a separate sheet of paper for your additional response(s). 12a. If your (or, for PLUS borrowers, the student's) last date of atterneoliment for which the loan was intended. Include tuition, let 12b. If your (or, for PLUS borrowers, the student's) ast date of atterneoliment for any part of the period of enrollment for which the loan was intended. Include tuition, let 13. Attach a copy of any documentation that supports your responsional school's catalog, refund policy, tuition bill(s), enrollment contract correspondence from the school that contains information about SECTION 4: BORROWER CERTIFICATION My signature below certifies that— 1 received each loan for which I am requesting a discharge on my (or, for PLUS borrowers, the student's) school account to p I (or, for PLUS borrowers, the student) did not attend the school refund of some or all of my loan funds. Except as explained in entitled, from the school or any third party. 1 have read and agree to the terms and conditions for loan disc	of attendance at the school:



LOAN DISCHARGE APPLICATION: SCHOOL CLOSURE

OMB No. 1845-0015 Form Approved Exp. Date 08/31/2006

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program / Federal Perkins Loan Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION	N. S. D. S. D. S. D. S. D. S. C. T. S.	
· · · · · · · · · · · · · · · · · · ·	Please anter or rement the following information	
	SSN (p)(9)	
	Name	
•	Address / (b)(6)	
	City, State, Zip Telephone – Homa (b)(6)	
	Telephone - Other	
	E-mail (optional)	
SECTION 2: STUDENT INFORMATION		
Before completing this section, carefully read the entire form, including	the instructions, definitions, and terms and conditions in Sections 4, 5, and 6 on this with item 3. If you are a perpet borrower applying for a PLUS loan discharge, begin to	with
1. Student's name (last, first, middle initial):		
(b)(6) 2. Student's SSN:	10/07	
3. Closed school's name: California to the color	(2/1/87)	
4. Date school clased (if known):		
5. Closed school's address (street, city, state, zip):		
Dates of attendance at the closed school: From		.,
7. Name of the program of study that you (or, for PLUS borrowers, the studer	nt) were enrolled in at the time the school closed: Lili Hred Acadam	4-
Did you (or, for PLUS borrowers, the student) complete the program of student No, check all reasons that apply:	dy at the closed school? ☐ Yes ☑ No	~
☐ The school closed while you (or, for PLUS borrowers, the student) were	re sុវ្ ll anrolled,	
You (or, for PLUS borrowers, the student) withdrew from the school or		
☐ You (or, for PLUS borrowers, the student) were on an approved leave	of absence when the school closed:	
From		
☐ Other (please explain):		
9. Did you (or, for PLUS borrowers, the student) complete or are you in the p ☐ Yes ☑ No If Yes, complete Item a) and b) below:	rocess of completing the program of study or a comparable program of study at another sch	noci?
a) Did the other school give you (or, for PLUS borrowers; the student) the closed school, or by any other means? Yes You	credit for training received at the closed school by allowing transfer of credits or hours earns	ed at
	program of study over from the beginning at the other school? The Yes	
10. Did the holder of your loan receive any money back (a refund) from the siff Yes, give the amount and explain why the money was refunded:	chool on your behalf? Yes Mo Don't Know	
 Did you (or, for PLUS borrowers, the student) make any monetary clayn connection with enrollment or attendance at the school?	with, or receive any payment from, the school or any third party (see definition in Section 5) Don't Know If Yes, please provide the following information:	in
(a) Name/address/telephone number of the party with whom the claim w	as made or from whom payment was received:	
(5) Amount/status of claim:	(c) Amount of payment received: \$ (Write "none" if no payment was received.)	
SECTION 3: BORROWER CERTIFICATION	(Trine house it no payment was received.)	
	ditions that apply to this lean discharge, as specified in Section 6 on the following page.	
my knowledge and belief. (b)(6)		
Borrower's Signature:	Date:	
1.1	/	

SECTION 4: INSTRUCTIONS FOR COMPLETING THE APPLICATION

Type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "January 31, 2006" = "01-31-2006"). If you need more space to answer any of the items, continue on separate sheets of paper and attach them to this form. Indicate the number of the item(s) you are answering and include your name and social security number (SSN) on all attached pages.

Sign and date the form. Then, send the completed form and any attachments to the address in Section 8.

SECTION 5: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program Includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans,
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- The Federal Perkins Loan (Perkins Loan) Program includes Federal Perkins Loans and National Direct Student Loans (NDSL).
- The date a school closed is the date that the school stopped providing educational instruction in all programs, as determined by the U.S. Department of Education (the Department).
- The holder of a borrower's FFEL Program loan(s) may be a lendor, a guaranty agency, or the Department. The holder of a borrower's Direct Loan Program loan(s) is the Department. The holder of a borrower's Perkins Loan Program loan(s) may be the Department or a school.
- Loan discharge due to school closure cancels the obligation of a borrower (and endorser, if applicable) to repay the remaining balance on a FFEL Program. Direct Loan Program, or Perkins Loan Program loan, and qualifies the borrower for reimbursement of any amounts paid voluntarily or through forced collection on the loan. For consolidation loans, only the amount of the underlying loans (the loans that were consolidated) that were used to pay for the program of study listed in Item 7 will be considered for discharge. The loan holder reports the discharge to all credit reporting agencies to which the holder previously reported the status of the loan.
- The student refers to the student for whom a parent borrower obtained a Federat PLUS Loan or Direct PLUS Loan.
- in Dates of attendance: The "to" date means the last date that you (or, for PLUS borrowers, the student) actually attended the closed school.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) were enrolled.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a tuition recovery program or performance bond

SECTION 6: TERMS AND CONDITIONS FOR LOAN DISCHARGE BASED ON SCHOOL CLOSURE

- I received FFEL Program, Direct Loan Program, or Perkins Loan Program loan funds on or after January 1, 1986, to attend (or, if I am a PLUS borrower, for the student) the school identified as "closed school" in Section 2 of this form. Those funds were either received by me directly, or applied as a credit to the amount owed to the school. I (or, if I am a PLUS borrower, the student) was enrolled at that school or on an approved leave of absence on the date that it closed, or withdrew from the school not more than 90 days before it closed (or longer if authorized by the Department). Due to the school's closure, I (or, if I am a PLUS borrower, the student) did not complete the program of study at that school. I (or, if I am a PLUS borrower, the student) did not complete and am not in the process of completing that program of study or a comparable program at another school by transferring credits or hours earned at the closed school to another school, or by any other means by which I (or, if I am a PLUS borrower, the student) benefited from the training provided by the closed school.
- I will provide, upon request, tostimony, a sworm statement, or other documentation reasonably available to me that demonstrates to the satisfaction of the Department or its designee that I meet the qualifications for loan discharge based on school closure, or that supports any representation that I made on this furnior on any accompanying documents.
- I agree to cooperate with the Department or its designee regarding any enforcement actions related to my request for loan discharge.
- I understand that my request for loan discharge may be deried, or my discharge may be revoked if I fail to provide testimony, a swom statement, or documentation upon request, or if I provide testimony, a swom statement, or documentation that does not support the material representations I have made, or if I (or, if I am a PLUS borrower, the student) completed or am in the process of completing the program of study or a comparable program at another school through transfer of credits or hours from the closed school or by any other means by which I (or, if I am a PLUS borrower, the student) benefited from the training provided by the closed school.
- I further understand that if my loan(s) are discharged based on any false, lictitious, or fraudulent statements that if knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable federal law.
- I heroby assign and transfer to the Department any right to a refund on the discharged loan(s) that I may have from the school identified in Section 2 of this form and/or any owners, affiliates, or assigns of the school, up to the amounts discharged by the Department on my loan(s).

SECTION 7: IMPORTANT NOTICES

Privacy Act Disclosure Notice: The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are §428(b)(2)(A) at seq., §451 at seq. and §461 at seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1976(b)(2)(A) at seq., 20 U.S.C. 1987a at seq., and 20 U.S.C. 1987a at seq

amended (20 U.S.C. 1078(b)(2)(A) of seq., 20 U.S.C. 1087a et seq., and 20 U.S.C. 1087as et seq.) and the euthority for collecting and using your Social Security Number (St is §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Femily Education Loan (FFEL) Program, the William D. Ford Federal Direct Loan (Direct Loan) Program, or the Federal Perkins Loan (Perkins Loan) Program and giving us your SSN are voluntary, but you must provide the requested Information, Including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forbearance, discharge, or forgiveness) under the EFEL, Direct Loan, and/or Perkins Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administrating our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, to locate you if you become definquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0015. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this application, please write to: U.S. Department of Education, Washington, DC 20202-4651.

If you have questions regarding the status of your individual submission of this application, confact your loan holder (see Section 8).

SECTION 8: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

if you need help completing this form, call:



LOAN DISCHARGE APPLICATION: UNPAID REFUND

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include lines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION	
SECTION 1. BORNOWER IDENTIFICATION	Pleat (b)(6)
	55N
	Name(b)(6)
	Address(b)(6)
	City. State, Z (b)(6)
•	Telephone - Home
	Telephone – Other (=-mail (optional) (b)(6)
	E-mail (optional) (D)(6)
SECTION 2: SCHOOL AND LOAN INFORMATION	ions and other information on the following page. If the school that you believe
owes you a refund is currently open, you should first contact the school to att	empt to resolve this issue before applying for an unpaid refund loan discharge. If you have a parent borrower applying for a BLUS loan discharge, begin with flern 1.
Student's name (last, first, middle initial): (b)(6)	2. Student's SSN (b)(6)
3a, School's name.)	3b. School's address (street, city, state, zip):
Robert tiance liar les	The full on St. Brooklyn W. 5. F this school is closed, were you (or, for PLUS borrowers, was trie student)
	attending the school when it closed? Yes No
6a. Do you have any other pencing or approved application(s) for discharge	
requesting a discharge, or is such a refund or payment being considered	
 If your answers to Items 6a and 6b are "No." skip to Section 3. If your ansfor each discharge, refund or payment, if known. Use a separate sheet of 	wer to Item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7c paper if you need to report more than one discharge, refund or payment.
7a. Reason for discharge, refund or payment:	
7b. From whom did you request the discharge, refund or payment (include to	ephone number)?
7c. Amount you received or that you expect to receive: \$	
SECTION 3: REFUND INFORMATION	
If you have documentation from the school showing the amount of the shown in the documentation from the school is correct, skip to Section 4. If you are unable to provide any of the request	impaid refund, attach a copy to this form. If you believe that the amount of the refund ou don't believe that the amount is correct or if you don't have this documentation, and information, write "Don't Know."
8. What amount do you believe the school owes you? \$	
9. Why do you believe the school owes you this amount?	
10. Your (or, for PLUS borrowers, the student's) first and last dates of attender	nce at the school:
	OR □ Never Attended
11. Your (or, for PLUS borrowers, the student's) program of study at the school	
which the loan was intended. For example, if you received a loan for the that quarter only. However, if you received a loan for the winter and sprii	charges or the amount of the financial aid you received for the period of enrollment for spring quarter only and you left school during the spring quarter, provide an amount for ig quarters, provide the total amount for both quarters. If the unpaid refund is for more ide the amounts requested in Item 12a or 12b for each period of enrollment separately,
12a. If your (or, for PLUS borrowers, the student's) last date of attendance we corrollment for which the loan was intended. Include tuition, fees, and o	
received for any part of the period of enrollment for which the loan was	
13. Attach a copy of any documentation that supports your responses to Item school's catalog, refund policy, tuition bill(s), enrollment contract, student correspondence from the school that contains information about the relui	is 8 through 12. Examples of documentation may include, but are not limited to, the account statement, registration forms, withdrawal form, attendance records, and any documentative the school owes you.
SECTION 4: BORROWER CERTIFICATION	
My signature below certifies that— I received each loan for which I am requesting a discharge on or after J my (or, for PLUS borrowers, the student's) school account to pay the ar	anuary 1, 1986. I received the loan funds directly, or they were applied as a credit to rount owed to the school,
. I (or, for PLUS borrowers, the student) did not attend the school or with	frew or was terminated from the school within the timeframe that would entitle me to a 2, fterns 6 and 7, I have not received this refund, or any benefit of a refund to which I am
1 have read and agree to the terms and conditions for lean discharge, a Under penalty of perjury, all of the information I have provided on this a	
my knowledge and b (b)(6) Borrower's Signature:	Date: 5/09/2007

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund issue before applying for this type of discharge,
- If you (or, for PLUS borrowers, the student) are currently attending the school, you are not eligible for this type of discharge. You should contact the school about the refund that you believe you are owed.
- If you (or, for PLUS borrowers, the student) were enrolled when the school closed or withdrew from the school within 90 days before the school closed and you (or, for PLUS borrowers, the student) sid not complete the program of study at another school, you may wish to apply for a closed school loan discharge rather than an unpaid refund discharge. If you are unsure about which type of lean discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2005" = "07-01-2005"). If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) were enrolled.
- The student (as in "or, for PLUS borrowers, the student") refers to the student for whom a parent borrower obtained a Federal PLUS Loan or Direct PLUS Loan.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a tuition recovery
 program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- Lagree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- Lassign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or
 any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts
 discharged by the Department on my loan(s).
- 1 understand that this request may be denied, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- Understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying ducuments, I may be subject to civil and criminal penalties under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you

The authorities for collecting the requested information from and about you are \$428(b)(2)(A) of seq. and \$451 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) et seq. and 20 U.S.C. 1087a et seq.) and the authority for collecting and using your Social Security Number (SSN) is \$484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are witundary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forbearance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collection your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclose/re to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administrating our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors is carder to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student linuarial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a count, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student and questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargarning agreement, we may disclose records to a fabor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a currently valid CMB control number. The valid CMB control number for this information objection is 1845-0958. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651.

If you have questions regarding the status of your individual submission of this form, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (if no address is shown, return to your loan holder.) If you need help completing this form, call:



LOAN DISCHARGE APPLICATION: UNPAID REFUND Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION	
(b)(6)	Pleas (b)(6) on:
	SSN
	Address
	City, State, Zip
	Telephone - Home ()
007515 10011 113	Telephone – Other i (b)(6)
007515-\$9,426.42	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
owes you a refund is currently open, you should first contact the school to atte	ions and other information on the following page. If the school that you believe empt to resolve this issue before applying for an unpaid refund loan discharge. If you
are a student borrower applying for loan discharge, begin with Item 3s. If you	are a parent borrower a (b)(6)
Student's name (last, first, middle initial): (b)(6)	2. Student's SSN:
	Di Orbert La 15 Table 1 Table
Od. SCHAOLS HALLE.	3b. Schoo,'s address (struet, city, state, zip):
Kobert Finnce	5. If this school is closed, were you (or, for PLUS borrowers, was the student)
4. is this school still open? 🔲 Yes 🔛 No 🔲 Don't Know	attending the school when it closed? Yes You
6a. Do you have any other pending or approved application(s) for discharge of	
65. Has this school or any third party (see the definition of third party) in Secrequesting a discharge, or is such a refund or payment being considered.	ction 6, on the following page) made a refund or payment for any loan to: which you are?
 If your answers to Itoms 6a and 6b are "No," skip to Section 3. If your ansifor each discharge, refund or payment, if known. Use a separate sheet of 	wer to Item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7c paper if you need to report more than one discharge, refund or payment.
Ta. Reason for discharge, refund or payment:	0 === =================================
4 Wonths	Dregnant
7b. From whom did you request the discharge, refund or payment (include te	ießhane number)?
DON'T Remember	
7c. Amount you received or that you expect to receive. \$	DON'T KNOW
SECTION 3: REFUND INFORMATION	
	unpaid refund, attach a copy to this form. If you believe that the amount of the refund ou don't believe that the amount is correct or if you don't have this documentation, ed information, write "Don't Know."
	Don't KNEW
9. Why do you believe the school owes you this amount?	
I did not get the Full Amore	ent of tuition FEE OF GRANT MONE
10. Your (gr. for PLUS borrowers, the student's) first and last dates of attendar O.G. - 1 2 - 1 3 7 to O.G. - 1 2 - 1 3 8	ance at the school:
11. Your (or, for PLUS borrowers, the student's) program of study at the scho	o: Cosmo to logist
12. Items 12a and 12b request information about the amount of the school's	charges or the amount of the financial aid you received for the period of enrollment for
	spring quarter only and you left school during the spring quarter, provide an amount for ng quarters, provide the total amount for both quarters. If the unpaid refund is for more
than one loan and the loans were for different periods of enrollment, prov- using a separate sheet of paper for your additional response(s).	vide the amounts requested in Item 12a or 12b for each period of enrollment separately,
	as before October 7, 2000, enter the amount of the school's charges for the period of
enrollment for which the loan was intended. Include tuition, fees, and of	
received for any part of the period of enrollment for which the loan was i	as on or after October 7, 2000, enter the total amount of federal grants and loans intended. \$
school's catalog, refund policy, tuition bill(s), enrollment contract, student	ns 8 through 12. Examples of documentation may include, but are not limited to, the account statement, registration forms, withdrawal form, attendance records, and any
correspondence from the school that contains information about the refur SECTION 4: BORROWER CERTIFICATION	to you believe the school owes you
My signature below certifies that	
	anuary 1, 1986. I received the loan funds directly, or they were applied as a crede to
now for for DILIC harroward, the envelopital ask and account to excite a se-	RODII GWEG IG IRE SCHOOL
my (or, for PLUS borrowers, the student's) school account to pay the an it (or, for PLUS borrowers, the student) did not attend the school or without	
 i (or, for PLUS borrowers, the student) did not attend the school or withorefund of some or all of my loan funds. Except as explained in Section 2 	drew or was terminated from the school within the timetrame that would entitle me to a 2, Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am
it (or, for PLUS borrowers, the student) did not attend the school or without refund of some or all of my loan funds. Except as explained in Section 2 entitled, from the school or any faird party. thave road and agree to the terms and conditions for loan discharge, as	drew or was terminated from the school within the timeframe that would entitle me to a 2, Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am
i (or, for PLUS borrowers, the student) did not attend the school or withor refund of some or all of my loan funds. Except as explained in Section 2 entitled, from the school or any third party. t have road and agree to the terms and conditions for loan discharge, as Under penalty of perjury. a (15)(3)	drew or was terminated from the school within the timeframe that would entitle me to a 2, Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am
it (or, for PLUS borrowers, the student) did not attend the school or without refund of some or all of my loan funds. Except as explained in Section 2 entitled, from the school or any faird party. thave road and agree to the terms and conditions for loan discharge, as	drew or was terminated from the school within the timeframe that would entitle me to a 2, Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am a specified in Section 7 on the following page.

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund issue before applying for this type of discharge.
- If you (or, for PLUS borrowers, the student) are currently attending the school, you are not eligible for this type of discharge. You should contact the school about the refund that you believe you are owed.
- If you (or, for PLUS borrowers, the student) were enrolled when the school closed or withdrew from the school within 90 days before the school closed and you (or, for PLUS borrowers, the student) did not complete the program of study at another school, you may wish to apply for a closed school loan discharge rather than an unpaid refund discharge. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2005" = "07-01-2005"). If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized). Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) were enrolled.
- The student (as in for, for PLUS borrowers, the student") refers to the student for whom a parent borrower obtained a Federal PLUS borrowers, the student" refers to the student for whom a parent borrower obtained a Federal PLUS borrowers, the student" refers to the student for whom a parent borrower obtained a Federal PLUS borrowers, the student" refers to the student for whom a parent borrower obtained a Federal PLUS borrowers, the student of the student for whom a parent borrower obtained a Federal PLUS borrowers.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a fulfilion recovery program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- Lassign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- I understand that this request may be denied, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- I understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civit and criminal penalties under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are §428(b)(2)(A) et seq. and §451 et seq. of the Higher Education Act of 1995, as amended (20 U.S.C. 1078(b)(2)(A) et seq. and 20 U.S.C. 1087a et seq.) and the authority for collecting and using your Social Security Number (SSN) is §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a foar (such as a deferment, fortbearance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information decironically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possiblo fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide in ancial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the Biggitton. If this information, either alone or with other information, indicates a potential violation of law, we may send if to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid CMB control number. The valid CMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the Information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write for U.S. Department of Education, Washington, DC 20202-4651.

If you have questions regarding the status of your individual submission of this form, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

If you need help completing this form, call:



LOAN DISCHARGE APPLICATION: UNPAID REFUND Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OMB No. 1545-0058 Form Approved Exp. Date 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION 1: BORROWER IDENTIFICATION	
/h\/6\	Picase enter or correct the following information:
(b)(6)	(b)(6)
	Name (b)(6)
	Address
	City: Cone; 21p
	Telephone - Home ((b)(6)
007515-10/15/07	E-mail (optional)
	Empir (opaquiar)
SECTION 2: SCHOOL AND LOAN INFORMATION	in the state of th
owes you a retund is currently open, you should first contact the sch	instructions and other information on the following page. If the school that you bolieve ool to attempt to resolve this issue before applying for an unpoid refund foun discharge. If you
are a student borrower applying for loan discharge, begin with Item 3	3a. If you are a parent borrower a (b)(6) with Item 1.
(b)(6)	2. Student's SSN:
16. 80000 s rame	3b. School's address (street, city, state, zip):
COBERT FINANCE	Willouby St Brooklyn, N.
4. is this set od: still open? 🖺 Yes 🔲 🗖 Oon't Know	5. If this school is closed, were you (or, for PLUS barrowers, was the student)
Sa. Do you have any other pending or approved application(s) for dis	attending the school/when it closed? Yes XNo
	ty" in Section 6, on the following page) made a refund or payment for any foan for which you are
requesting a discharge, or is such a refund or payment being co	
	your answer to Item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7c
	sheet of paper if you need to report more than one discharge, refund or payment.
7a. Reason for discharge, refund or payment:	'A DA
Morey you Claimthat I ow	le you you took from my wife who noticed elephone number)
b. From whom o'd you request the discharge, refund or payment (if	ratude (diephone number)?
had Morning to do with	My loan. Me and my down live tog
7c. Amount you received as that you expect to receive S	625, and don't pay was t
SECTION 3: REFUND INFORMATION	and work buy all s
	t of the unpaid refund, attach a copy to this form. If you believe that the amount of the refund
shown in the documentation from the school is correct, skip to Section	on 4. If you don't believe that the amount is correct or if you don't have this documentation,
complete Items 8 through 13. If you are unable to provide any of the	
8. What amount do you believe the school owes you? \$	II. To My wife the money awed in
9. Why do you believe the school owes you this amount?	1
10 Me,	
10. Your (or, for PLUS borrowers, the student's) first and last dates of	of attendance at the school:
<u>:1:4-1-817-1-1-1-1-1-1-1-1-1-817-1-1</u>	OR ONever Attended I don't remember the diate of
11. Your (or, for PLUS borrowers, the student's) program of study at	the school put it was only for one Month It
12. Items 12a and 12b request information about the amount of the	school's charges or the amount of the financial aid you received for the period of enrollment for [17]
which the loan was intended. For example, if you received a load that relater only. However, if you received a load for the winter.	on for the spring quarter only and you left school during the spring quarter, provide an amount for and spring quarters, provide the total amount for both quarters. If the unpaid refund is for more is 5 in
than one toan and the leans were for different periods of enfollm	ent, provide the amounts requested in Item 12a or 125 for each period of enrollment separately,
using a separate sheet of paper for your additional response(s).	
12a. If your (or, for PEUS borrowers, the student's) last date of alten	idance was before October 7, 2000, enter the amount of the school's charges for the period of
enrollment for which the lean was intended. Include tuition, fee	es, and other school charges. \$ 4 200
12b. If your (or, for PLUS borrowers, the student's) last date of attention received for any part of the period of enrollment for which the k	
13. Altach a copy of any documentation that supports your response	as to Rems 8 through 12. Examples of documentation may include but are not limited to the
	es to Rems 8 through 12. Examples of documentation may include, but are not limited to, the student account statement, registration forms, withdrawal form, attendance records, and any the refund you believe the school owes you.
school's catalog, refund policy, fulfion bill(s), enrollment contract correspondence from the school that contains information about SECTION 4: BORROWER CERTIFICATION	li student account statement, registration forms, withdrawal form, attendance records, and any
school's catalog, refund policy, fulfion bill(s), enrollment contract correspondence from the school that contains information whout SECTION 4: BORROWER CERTIFICATION My signature below certiles that— • Troceived each loan for which I am requesting a discharge on a	I student account statement, registration forms, withdrawal form, attendance records, and any the refund you believe the school owes you. or after January 1, 1986. Treceived the toan funds directly, or they were applied as a credit to
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SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund issue before applying for this type of discharge
- If you (or, for PEUS berrowers, the student) are currently attending the school, you are not eligible for this type of discharge. You should contact the school about the refund that you believe you are owed.
- If you (or, for PLUS borrowers, the student) were enrolled when the school closed or withdrew from the school within 90 days before the school closed and you (or, for PLUS borrowers, the student) did not complete the program of study at another school, you may wish to apply for a closed school loan discharge rather than an unpaid refund discharge. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2005" = "07-01-2005"). If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social socurity number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid refund cancels your obligation (and any endorsor's obligation) to repay the portion of your toan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program feading to a degree or certificate in which you (or, for PLUS borrowers, the student) were enrolled.
- The student (as in "or, for PLUS borrowers, the student") refers to the student for whom a parent borrower obtained a Federal Pt US Loan or Direct Pt US Loan.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a trition recovery program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- Lagree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- I assign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- Funderstand that this request may be denied, or my discharge may be revoked. If I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- t understand that if my lean is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents. I may be subject to civil and criminal penalties under applicable federal law.

SECTION 8. IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are §428(b)(2)(A) at seq. and §451 at seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1078(b)(2)(A) at seq. and 20 U.S.C. 1087a at seq.) and the authority for collecting and using your Social Security Number (SSN) is §484(a)(4) of the HEA (20 U.S.C. 1691(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forbearance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our local programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either afone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under Siu St.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4651.

If you have questions regarding the status of your individual submission of this form, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

If you need help completing this form, call:



LOAN DISCHARGE APPLICATION: UNPAID REFUND Federal Family Education Loan Program / William O. Ford Federal Direct Loan Program

OM8 No. 1845-0008 Form Approved Exp. Data 12/31/29/07

WARNING: Any person wito knowingly makes a false statement or in argresentation on this form or on any accompanying documents will be subject to penalties which may include fines, improport in or both, under the U.S. Criminal Code and 20 U.S.C. 1007.

SECTION 1: BORROWER IDENTIFICATION	
	Pigage enter or correct the following information:
	\$\$\text{\(b)(6)} \\ \((b)(6)\)
	Name - (b)(6)
	Addigss
	City, State, Z., (b)(6)
	Telephone - Other
	The state of the s
COONING CONTROL AND A DAMPING COMPTION	E-mail (eptional)
SECTION 2: SCHOOL AND LOAN INFORMATION	ns and other information on the following page. If the school that you believe
owes you a refund is currently open, you should first contact the school to attem are a student beginner applying for loan discharge, been with Item 39. If you a	opt to resolve this issue before applying for an unpaid refund is an discharge. If you is a parent before applying for a REUS lase electrons from with item 1.
1((b)(6)	2. Sludent's SSN (b)(6)
3a, School's name	3b. School's address (street, city, state, zip).
Poseta fince	Grand Congress. Oby NY
4. Is this school still open? Yes No Don't Know	5. If this school is closed, were you (or, for PLUS borrowers, was the student)
	altending the school when it closed? Yes No
Ea. Do you have any other pending or approved application(s) for discharge of a	· · · · · · · _ · _
6b. Has this school or any third party (see the definition of "third party" in Section requesting a discharge, or is such a refund or payment being considered?	n 6, on the following page) made a retund or payment for any loan for which you are Yes 日 No ・ いったいっしゃ スプー Su・モ
7. If your answers to Items 6a and 6b are "No," skip to Section 3. If your answer	er to Item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7c
for each discharge, refund or payment, if known. Use a suparate sheet of pa	per if you need to report more than one discharge, refund or paymors.
7a. Reason for discharge, refund or payment	
7b. From whom did you request the discharge, refund or payment (include telep	hone number)?
7c. Amount you received or that you expect to receive: \$ DCbt for	Trolless
SECTION 3: REFUND INFORMATION	31.4003
	hald refund, attach a copy to this form. If you believe that the amount of the refund
shown in the documentation from the school is correct, skip to Section 4. If you complete items 8 through 13. If you are unable to provide any of the requested	information, write "Don't Know."
8. What amount do you believe the school owes you? \$ 13,927, 18	
9. Why do you believe the school owes you this amount?	and a second second second second
	ver wer never used; were attended the octo.
10. Your (or, for PLUS borrowers, the student's) first and fast dates of attendance	e at the school: OR (X Never Altended
11. Your (or, for PLUS borrowers, the student's) program of study at the school:	
12. Hems 12a and 12b request information about the amount of the school's chi	argus or the amount of the financial aid you received for the period of enrollment for
	ring quarter only and you left school during the spring quarter, provide an amount for quarters, provide the total amount for both quarters. If the unpaid refund is for more
than one toan and the toans were for different periods of enrollment, provide	the amounts requested in Item 12a or 12b for each period of enrollment separately.
using a separate sheet of paper for your additional response(s).	
12a. If your (or, for PEUS borrowers, the student's) last date of attendance was enrollment for which the loan was intended. Include tuition, fees, and other	before October 7, 2000, enter the amount of the school's charges for the period of it school charges. S not Surf
12b. If your (or, for FLUS borrowers, the student's) tast date of attendance was received for any part of the period of encolment for which the loan was into	on or after October 7, 2000, onter the total amount of federal grants and loans
13. Attach a copy of any documentation that supports your responses to Items (3 through 12. Examples of documentation may include, but are not limited to, the
school's catalog, refund policy, fultion bill(s), enrollment contract, student ac correspondence from the school that contains information about the refund	count statement, registration forms, withdrawal form, attendance records, and any
SECTION 4: BORROWER CERTIFICATION	<u> </u>
My signature below certifies that—	unit 1 1996. I received the loss funds disselful as thousand as a seed to
 I received each loan for which I am requesting a discharge on or after Jans my (or, for PLUS borrowers, the student's) school account to pay the amount 	uary 1, 1986. I received the loan funds directly, or they were applied as a credit to unit owed to the school.
 Lear for PLUS negowers, the student) aid not attend the school or withdre 	w or was terminated from the school within the timeframe that would entitle me to a terms 6 and 7, I have not received this refund, or any benefit of a refund to which I am
 I have read and agree to the terms and conditions for loan discharge, as sp 	
Under cenalty of perjury (b)(6)	ecompanying documentation is tree and accurate to the best of
my knowledge and belief	Date: 2-17-09
Borrower's Signature:	Date: 2 7 - 0 9

SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:

- If the school is currently open, you should first contact the school and attempt to resolve the unpaid refund issue before applying for this type of discharge.
- If you (or, for PLUS borrowers, the student) are currently attending the school, you are not explicit for this type of discharge. You should contact the school about the refund that you believe you are ewed.
- If you (or, for PLUS borrowers, the student) were enreted when the school closed or withdraw from the school within 90 days before the school closed and you (or, for PLUS borrowers, the student) did not complete the program of study at another school, you may wish to apply for a closed school load decharge rather than an unpaid refund discharge. If you are unsure about which type of loan discharge is most appropriate for you, contact your loan holder at the address shown in Section 9.

When completing this form, type or print using darkink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2005" = "07-01-2005"). If you need more space to answer say of the Items, continue on separate sheets of paper and attach them to this form, indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on o'll attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans
- The William D. Ford Federal Direct Loan (Direct Loan) Program includes Federal Direct Stational Ford Loans (Direct Subsidized Loans). Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an enpaid refund cancels your obligation (and any endorser's obligation) to repay the portion of your foan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be reimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS borrowers, the student) word enrolled.
- The student (as in "cr., for PLUS borrowers, the student") refers to the student for whom a parent borrower obtained a Federal PLUS Loan on Direct PLUS Loan.
- Third party refers to any entity that may provide reimbursement for a refund oweld by the school, such as a State or other entity offering a fullion recovery program of a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- I agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably available to me that demonstrates that I meet the qualifications for an unpoid refund discharge.
- Lassign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on any loan(s).
- 1 understand that this request may be denied, or my discharge may be revoked, if I fail to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- I understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying documents, I may be subject to civil and criminal penalties under applicable federal faw.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (5 U.S.C. 552s) requires that the following riptice be provided to you:

The authorities for collecting the requested information from and about you are \$428(b)(2)(A) of seq. and \$451 of seq. of the Higher Education Act of 1965) as amended (20 U.S.C. 1078(b)(2)(A) of seq. and 20 U.S.C. 1087a of seq.) and the authority for collecting and using your Social Security Number (SSN) is \$484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Perticipating in the Federal Family Education Lean (FFEL) Program or the William D. Ford Federal Direct Lean (Direct Lean) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are lo verify your identity, to determine your eligibility to receive a tean or a benefit on a tean (such as a determent, forbearance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The Information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to itermit the servicing or collection of your loan(s), to counsel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your fean playments or if you default, to provide default rate calculations, to provide financial aid this program administrators with tracking refunds and concellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

In the event of filigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is refevant and necessary to the hitigation. If this information, either along or with other information, indicates a potential victation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid duestions. In circumstances involving employment complaints, givenances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for Improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651.

It you have questions regarding the status of your *individual submission of this for*m, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

If you need help completing this form, call:



DEPARTMENT OF THE TREASURY FINANCIAL MANAGEMENT SERVICE P.O. BOX 1686 BIRMINGHAM, ALABAMA 35201-1686

THIS IS NOT A BILL - PLEASE RETAIN FOR YOUR RECORDS

02/03/09

(b)(6)

Dear

As authorized by Federal law, we applied all or part of your Federal payment to a debt you owe. The government agency (or agencies) collecting your debt is listed below.

U.S. DEPARTMENT OF EDUCATION FEDERAL OFFSET UNIT

P.O. BOX 5227

GREENVILLE

TX 75403

800-621-3115

(800) 621-3115

PURPOSE; Non-Tax Federal Debt

TIN Num: 060-49-5100

TOP Trace Num. Acct Num: (b)(6)

Amount This Creditor:

\$118.00

Creditor: 05 Site: 40

The Agency has previously sent notice to you at the last address known to the Agency. That notice explained the amount and type of debt you owe, the rights available to you, and that the Agency intended to collect the debt by intercepting any Federal payments made to you, including tax refunds. If you believe your payment was reduced in error or if you have questions about this debt, you must contact the Agency at the address and telephone number shown above. The U. S. Department of the Treasury's Financial Management Service cannot resolve issues regarding debts with other agencies.

We will forward the money taken from your Federal payment to the Agency-to-be applied to your dobtbalance; however, the Agency may not receive the funds for several weeks after the payment date. If you intend to contact the Agency, please have this notice available. Please do not contact the Social Security Administration regarding this reduction made in your Federal payment.

U. S. Department of the Treasury Financial Management Service (800) 304-3107 TELECOMMUNICATIONS DEVICE FOR THE DEAF (TDD) (866) 297-0517

PAYMENT SUMMA BY PAYEE NAME: (b)(6)

PAYMENT BEFORE REDUCTION:

\$868.00

PAYEE TIN: (b)(6) PAYMENT DATE: 02/03/09

TOTAL AMOUNT OF THIS REDUCTION: PAYING FEDERAL AGENCY: Social Security Administration

PAYMENT TYPE: EFT

CLAIM ACCT NUM: (b)(6)

C1

BENEFICIARY TIM(b)(6)

FOR OFFICIAL USE ONLY: 0000047328 P5308300006048519609981517013ALTR-P01SIMO047368

RL1207





LOAN DISCHARGE APPLICATION: UNAUTHORIZED SIGNATURE/UNAUTHORIZED PAYMENT

OMB No. 1845-0015 Form Approved Exp. Data 06/30/2006

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

which may include fines, impresonment or both, under the U.S.	ent or manepresentation on this form or on any accompanying documents will be subject to persuper. Criminal Code and 20 U.S.C. 1097.
SECTION 1: BORROWER IDENTIFICATION	
`	Plea (b)(6)
	SEN (0)(0)
•	Name (b)(6)
	Address (b)(6)
	City, State, Zip
	Taisphone - Home (b)(6)
	Telephone - Other ()
•	E-mail address (optional)
SECTION 2: STUDENT INFORMATION	
Before responsing, carefully read the entire form, including the instructions a	nd other information on the following page. If you are a student borrower applying for
ioan discharge, begin with item 3. If you are a parent borrower applying for a 1. Student's name (last, first, middle initial):	FLUS was austualys, augm with wan 1.
2. Student's SSN:	
3. School's name:	
4. School's address (street, city, state, zip):	
6. Dates of attendance at the school: From	1 To - -
6. Did you sign the application, promissory note, master promissory note (MPN	
7. Did you endoged each loan check or sign your name on each electronic funds	
☐ Yes ☐ No ☐ Does Not Apply	
If No, on which document(s) did someone eise sign your name? It is not the No, did you (or, for PLUS borrowers, the student) ever receive say money. PLUS borrowers, the student) owed to the school? I yes I No I Do	color delectronic funds transfer authorization of master check authorization from the achool, or did the achool ever reduce the amount of money that you (or, for n't Know it Yes, explain (give dates, amounts, and circumstances):
If No or Don't Know, explain how you (or, for PLUS borrowers, the student) p	
8. If you answered No to lem 6 or Itam 7, do you know who signed your name	
☐ Yes ☐ No If Yes, identify the person who signed your name on the do School employee or representative (name and position):	
Other person (name):	
Provide any other information about the circumstances under which another;	Derson signed your name:
IMPORTANT: If you did not sign your name on one of the documents listed in it is anisture in addition to the signature on this application. At least two of there say after the date of the document on which someone else signed your name. Examples the case of the document on which someone else signed your name. Examples was written include—but are not limited to—cancelled checks, tax returns to considered for a loan discharge.	om 6 or from 7, you must attach documents containing four other samples of your imples must clearly show that your signatures were written within one year hence or ples of documents that would include both a signature sample and the date that the urns, and driver's licenses. If you do not provide these signature samples, you cannot
Did the holder of your loan receive any money back (a refund) from the school if Yes, give the amount and explain why the money was refunded:	ol on your behalf? D'Yes To Don't Know
18. Old you (or, for PLUS borrowers, the student) make any monetary claim with in connection with enrollment or attendance at the school: ☐ Yes ☐ No (a) Name/address/telephone number of the party with whom the claim was m	or receive any payment from, the school or any third party (see definition in Section 5) Di Don't Know — If yes, please provide the following information; ade or from whom payment was received:
(b) Amount/status of ctaim:	(c) Amount of payment received: \$
	(Write "none" If no payment was received.)
SECTION 3: BORROWER CERTIFICATION	
My signature below certifies that I have read and agree to the terms and condition Under penalty of perjury. (b)(6) (b)(6)	is that apply to this loan discharge, as specified in Section 6 on the following page. If the following page is form and in any accompanying documentation is true and accurate to the best of my
Borrower's Signature:	Date: 0211103



U.S. DEPARTMENT OF EDUCATION OFFICE OF POSTSECONDARY EDUCATION 50 UNITED NATIONS PLAZA - REGION IX SAN FRANCISCO, CA 94102-4987

SAN FR

ANCISCO SERVICE CENTER March 20, 2003
(b)(6)
Re: (b)(6)
Deal (b)(6)
This letter acknowledges receipt of your swom statement requesting discharge of the above referenced to an unauthorized signature.
Your application for loan discharge under the Unauthorized Signature regulations, 34 CFR §682.402(e), is being returned to you for the following reason (s):
X Section 2, question 6 & 7 of the discharge application was incomplete and your answers to the questions are unclear. Please explain, "what documents is it that someone signed your name. If you do not answer all of the questions and complete the application; the Department of Education will not be able to review your request for a discharge of the student loan in question.
X Student borrowers requesting loan discharge due to the unauthorized endorsement of a loan check or electronic funds transfer are required to provide five different authentic specimens of his or her signature, two of which were made within one year of the contested signature. This means that we will need additional signatures, from you, between 07/87 and 07/89, without the requested signature samples, a determination cannot be made regarding the validity of the contested signature.
Section of the discharge application is illegible
Promissory note was sent under separate cover.
Promissory note is enclosed.

If you have any questions or desire additional assistance please contact our customer service at 1-800-621-3115 or you may visit the official U.S. Department of Education website at http://ed.gov/index/.jsp

Loan Analyst

Loan Service Center

Enclosure



LOAN DISCHARGE APPLICATION: UNPAID REFUND Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program

OMB No. 1845-0058 Form Approved Exp. Date 12/31/2007

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents

	onment or both, under the U.S. Chiminal Code and 20 U.S.C. 1097.
SECTION 1: BORROWER IDENTIFICATION	Please Vol.
	LSSN (D)(D)
3 1	4-Name (b)(6)
007515	Address ((b)(6)
KU / 2 00	City, State, Zip
(10.	Tolephone – Homo ((b)(6)
•	Telephone - Other (
	-E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
owes you a refund is currently open, you should first contact the school to a are a student borrower applying for loan discharge, begin with Hem 3a. If yo	ctions and other information on the following page. If the school that you believe attempt to resolve this issue before applying for an unpeid refund loan discharge, if you ou are a perent borrower applying for a PLUS loan discharge, begin with liem 1.
(b)(6)	2"Student's SSN: (b)(6)
3auSchoofs namo:	Jb. School's acdress (stroot, city, state, zip):
HODERT LIANCE HAIR DESIG	2435 GRAND CONCOLLASE ROMIXAG
/4. Is this school still open 7 ☐ Yes Ø No ☐ Don't Know /	5. If this school is closed, were you (or, for PLUS borrowers, was the student) attending the school when it closed? Yes
6a. Do you have any other pending or approved application(s) for discharge	
requesting a discharge, or is such a refund or payment being considere	
for each discharge, refund or payment, if known. Use a separate sheet of	rswer to flam 6a or 6b is "Yos," provide the information requested in Items 7a, 7b, and 7c of paper if you need to report more than one discharge, refund or payment.
7a. Reason for discharge, refund or payment:	•
7b. From whom did you request the discharge, refund or payment (include to	alaphone number)?
7c. Amount you received or that you expect to receive: \$	
SECTION 3: REFUND INFORMATION	
If you have documentation from the school showing the amount of the shown in the documentation from the school is correct, skip to Section 4. If complete items 8 through 13. If you are unable to provide any of the reques	unpaid refund, attach a copy to this form. If you believe that the amount of the refund you don't believe that the amount is correct or if you don't have this documentation, ted information, write "Don't Know."
8. What amount do you believe the school owes you? \$ 749.00	
9. Why do you boileve the school owes you this amount? See Attrached	4
10. Your (or, for PLUS borrowers, the student's) first and last dates of attend	ance at the achon!
	OR MNever Attended
11. Your (cr. for PLUS borrowers, the student's) program of study at the sch	
which the loan was intended. For example, if you received a loan for the that quarter only. However, if you received a loan for the winter and spri than one loan and the loans were for different periods of enrollment, pro- using a separate sheet of paper for your additional response(s).	charges or the amount of the financial aid you received for the period of enrollment for a spring quarter only and you left school during the spring quarter, provide an amount for ing quarters, provide the total amount for both quarters. If the unpaid refund is for more wide the amounts requested in Item 12a or 12b for each period of enrollment separately.
enrollment for which the loan was intended. Include trition, fees, and o	
received for any part of the period of enrollment for which the loan was	
school's catalog, refund policy, tuition bill(s), enrollment contract, studen correspondence from the school that contains information about the refu	ns 8 through 12. Examples of documentation may include, but are not limited to, the t account statement, registration forms, withdrawat form, attendance records, and any nd you butleve the school owes you.
SECTION 4: BORROWER CERTIFICATION	
my (or, for PLUS borrowers, the student's) school account to pay the ar	January 1, 1986. I received the loan funds directly, or they were applied as a credit to mount owed to the school.
I (or, for PLUS borrowers, the student) did not attend the school or with	drew or was terminated from the school within the timeframe that would entitle me to a 2, Items 6 and 7, I have not received this refund, or any benefit of a refund to which I am
 I have read and agree to the terms and conditions for loan discharge, a 	
 Under penalty of perjury, all of the Information I have provided on this a my knowledge and belief. 	pplication and in any accompanying documentation is true and accurate to the best of
-Berrower's Signature:	Dato: 7-31-08

August 1, 2008

United States Dept. Of Education Federal Student Aid Loan Discharge Applications Processing Group Reg. Office, RM 8633 50 Beale Street San Francisco, CA 94105

To: Whom It May Concern:

Re: Request for Refund and Loan Discharge

I have outlined below the reasons why I believe I am due a refund in the amount of

There were two loan agreements: (Copies are attached)

- There were two loan agreements: (Copies are attached)

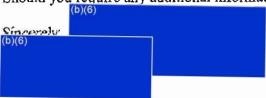
 1. The first one signed on has been forged. I did not sign this form and my birth date is incorrect.
- 2. The second one was completed by me on (b)(6), however I never attended the school because I was denied admittance by the school.

Again, I emphasize I have never attended Robert Fiance Hair Design at any time, 2435 Grand Concourse, Bronx NY 10468. Based on the fact that checks were issued and they were cashed leads me to believe that someone was operating a scam of which I am a victim.

This injustice has ruined my credit worthiness and caused the government to authorize my tax returns and other payment to be applied to this debt.

I respectfully request careful consideration of this situation and a full fund of which has been taken and applied toward this debt which is not mine. I am also requesting that the appropriate credit reporting bureaus receive notification of the cancelled debt.

Should you require any additional information please contact me at 718-850-0367.



Copies: NYS Attorney General's Office, Consumer Frauds and Protection Bureau

Federal Trade Commission NYS Banking Department

NYS Attorney General's Office, Andre M. Cuomo



DEPARTMENT OF THE TREASURY FINANCIAL MANAGEMENT SERVICE P.O. BOX 1686 BIRMINGHAM, ALABAMA 35201-1686

THIS IS NOT A BILL - PLEASE RETAIN FOR YOUR RECORDS

02/15/08

Dear

GREENVILLE

As authorized by Federal law, we applied all or part of your Federal payment to a debt you owe. The government agency (or agencies) collecting your debt is listed below.

U.S. DEPARTMENT OF EDUCATION FEDERAL OFFSET UNIT P.O. BOX 5227

TX 75403

800-621-3115 (800) 621-3115 PURPOSE: Non-Tax Federal Debt TIN Num: 101-6(1-2651
TOP Trace Num: (b)(6)
Acct Num: (b)(6)
Amount This Creditor:
Creditor: 05 Site: 90

The Agency has previously sent notice to you at the last address known to the Agency. That notice explained the amount and type of debt you owe, the rights available to you, and that the Agency intended to collect the debt by intercepting any Federal payments made to you, including tax refunds. If you believe your payment was reduced in error or if you have questions about this debt, you must contact the Agency at the address and telephone number shown above. The U. S. Department of the Treasury's Financial Management Service cannot resolve issues regarding debts with other agencies.

We will forward the money taken from your Federal payment to the Agency to be applied to your debt balance; however, the Agency may not receive the funds for several weeks after the payment date. If you intend to contact the Agency, please have this notice available.

U. S. Department of the Treasury
Financial Management Service
(800) 304-3107
Telecommunications Device for the Deaf (TDD) (866) 297-0517

PAYMENT SUMMARY
PAYEE NAME:

PAYMENT BEFORE REDUCTION:

TOTAL AMOUNT OF THIS REDUCTION.

PAYING FEDERAL AGENCY: Internal Revenue Service
(See Insert on Tax Refund Offsets for Additional Information)

PAYMENT DATE: 02/15/08 PAYMENT TYPE: Check SPLIT REFUND CODE:

FOR OFFICIAL USE ONLY: 0000001252 A4304272210160265100475949121ALTR-P01JEFF001265

RL0506



DO NOT SEND CASH
MAKE CHECKS PAYABLE TO:
U.S. DEPARTMENT OF EDUCATION
SHOW YOUR SOCIAL SECURITY NUMBER
ON YOUR CHECK

BALANCE

RETURN THIS PORTION WITH YOUR PAYMENT

NOTE NAME/ADDRESS/PHONE NO. CHANGES ON BACK

Send Payment To:

Greenville, TX 75403-4169

(b)(6)

000094 National Payment Center
U.S. Department of Education
P.O. Box 4169

(b)(6)

DETACH AND KEEP THIS PORTION FOR YOUR RECORDS

DIVERSIFIED COLLECTION SERVICES, INC. A PERFORMANT COMPANY 333 NORTH CANYONS PARKWAY SUITE 100 LIVERMORE CA 94551 925 960 4800 MAIN 925 960 4680 FAX PERFORMANTCORP.COM

DCS

June 12, 2008

This letter is to notify you that Diversified Collection Services, Inc. (DCS, Inc.) has commenced collection efforts regarding your debt referred by the U.S. Department of Education.

Due to your failure to honor your obligation with your original lender, the entire unpaid balance of your loan is due and payable. Your defaulted loan(s) may have been reported to all national credit bureaus, which could inhibit your ability to obtain future credit.

Furthermore, should you continue to refuse to pay this debt while employed and/or possessing other assets, the Department of Education may authorize the initiation of wage garnishment proceedings, authorized by the Debt Collection Improvement Act, 31 U.S.C. 3720D and 34 C.F.R. Part 34, or your account may be referred to the U.S. Department of Justice for legal action.

However, if your financial situation warrants such consideration, we have been authorized to substantially reduce the amount on the above-referenced account and cease any further collection efforts if your account is paid in full or assist you in establishing a possible repayment program on your loan. To take advantage of this offer, you should telephone your DCS account representative at 888-335-6267 to discuss your eligibility to participate in this program and obtain your current payoff balance.

Unless you notify this office within 30 days after receiving this notice that you dispute the validity of this debt or any portion thereof, this office will assume this debt is valid. If you notify this office in writing within 30 days from receiving this notice, this office will: obtain verification of the debt or obtain a copy of a judgment and mail you a copy of such judgment or verification. If you request this office in writing within 30 days after receiving this notice, this office will provide you with the name and address of the original creditor, if different from the current creditor.

As of the date of this letter, you owe the balance reflected. Because of interest and other charges that may vary from day to day, the amount due on the day you pay may be greater. Hence, if you pay the amount shown above, an adjustment may be necessary after we receive your check, in which event we will inform you. For further information on your balance, write to DCS or call the toll-free number provided above.

This is an attempt to collect a debt by a debt collector, and any information obtained will be used for that purpose.

PLEASE SEE THE REVERSESIDE FOR THE FEDERAL VALIDATION NOTICE AND OTHER STATE COMPLIANCE INFORMATION.

GSL PROMISSORY NOTE

A. PROMISE TO PAY

The Interest, Guarartos Focusard Cristination Fee raise and tenns (maniformed in the Promisis to Pay on the front of this application promissory note) are:

1. Interest on the impaid principal balance: The applicable interest rate on this roam will be liquired in the following manner: If I have an unpaid principal balance on a Gouranteed Student Loan having an applicable interest rate of 6%, the applicable interest rate on this loan will be written to can having an applicable interest rate on this loan will be same as that of my other loanies, if I have no outstanding Guaranteed Student Loan having an applicable interest rate on this loan will be same as that of my other loanies). If I have no outstanding Guaranteed Student Loans, my applicable interest rate on this loan will be 8%. I understanding Guaranteed Student Loans, my applicable mereliat benefits, the interest basis on outstanding Guaranteed Student Loans, my applicable therefits the interesting the Secretary of Seculotic (Secretary) (a) during my paradial tenefits, the interest and the interest seculous and interest and the interest seculous secretary in this Note, and (c) during the time my loan comments are defined and one of the promotion of the interest of the

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TO PRHEMPANCE

If an unable to repay this loss in accordance with the lamb estables. With the happeners in this ketter the product the landers to modify these terms. Understanding such modify where the last like forces adopted under a policy and modify these terms. Understanding such modify these terms to be an open of the without a policy and the fact such that is notification at apparent terms under this Sciolars differs that lightly ment (as described in this Note) and had during this period (will remain responsible to, payment of therest, which ing lender may (a) callect from me on a periodic basis or to) feet to the calculation in a page of this source of this source.

H. DEFAULT 🕠

2100000 : Onfinition—Lunderstand that under the Act, and HEAF Rules and Regulations, say of the following avents is a delibuit.

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b maxing any felso representance for the purpose of obtaining the Month

a using the loan procriets to other than obtaining purposes; a failing to smooth a the time identified as my lost period:

e not notifying the tendre immedia jally if (La) drop to less than a half-time student. (D) Chanca my graduation date: (3 - 5 tution) my name, or (d) change my platmanent address.

2. Consequenços at artiquit - It tooksult on this loan:

a. The render may carries the order errord amount of no load, including effects, errord addy due and payable.

The render, holder or quaranty powerty may displace to schools I have alrended on the currently attended? "

Culturally attended?"

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Pay to the order of Higher Education Assistance Foundation ("HEAF") without recourse, provided, however, activities and instructions in the indorsement without recourse, the undersigned hereby expressly: a) no defense of any party is good against the undersigned; and b) the undersigned is not at default under the terms of that certain Lenger Agree. the second of th . Warrants that:

ment for Guarantee of Student loans with Federal Reinsurance ("Lender Agreement") between it and HEAF, in accordance, with which payment of the indebtedness evidenced by this instrument was guaranteed by HEAF. 2. Disclaims the implied warranty that it has no knowledge of any medivency proceeding instituted with respect to the maker of this instrument and instead warranks that to the extent it has knowingge of any such proceeding it has disclosed masseme to HEAF, but no other implied warranties are hereby disclaimed.

AFFIX TO BACK OF FROMISSORY NOTE

a) upon payment in full by HEAF of the claim submitted by the undersigned 3. Acknowledges that

pursuant to the aforesaid Lender Agreement, HEAF will have discharged all or its poligations to the undersigned arising out of azid Lender Agroement; and b) notwinstanding payment by HEAF of the undersigned's claim and accep-

tance by HEAF of transfer of this instrument in consideration thereof. HEAF has not waived any rights that it may have against the undersigned pursuant is the let (b)(6)

SIGNATURE 12612 F0025 10-87 TITLE

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SCHOOL CERTIFICATION

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A. PROMISE TO PAY

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B. DISCLOSURE OF LOAN INFORMATION

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C. GENERAL

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E. PREPAYMENT

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of DEFAULT

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to making any faite representation for the purpose of obtaining this loan; or using the loan proceeds for other than educational purposes; or failing to error in the school mar completed the application for the time identifice as try.

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esc amounts it chis toan is referred for Dobt Collection Practices Act, I will pay paid prescipal and accruert interest; Daie is at the option of the lander which it and other requirements of low Faiture to the lender's right to exercise the option

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in be required to pay KEAF of amounts

AFFIX TO BACK OF PROMISSORY NOTE

Pay to the order of Higher Education Assistance Frandation ("HEAF") without recourse, provided, however, notwithstanding this indersement without recourse, the undersigned hareby expressly:

a) no defense of any party is good against the undersigned; and

b) the undersigned is not in default under the terms of that certain Lender Agreement for Guarantee of Student icans with Federal Figinsurance ("Lender Agreement") between it and HEAF, in accordance with which payment of the indebtedness evidenced by this instrument was guaranteed by HEAF.

2. Disclaims the implied warranty that it has no knowledge of any insolvency proceeding instituted with respect to the maker of this instrument and instead warrants that to the extent it has knowledge of any such proceeding it has disclosed the same to HEAF, but no other implied warranties are hareby disclaimed.

Acknowledges that:

a) upon payment in full by HEAF of the claim submitted by the undersigned pursuant to the aforesaid Lander Agreement, HEAF will have discharged all of its obligations to the undersigned existing out of said Lander Agreement, and

b) notwithstanding payment by HEAF of the undersigned's claim and acceptance by HEAF of transfer of this instrument in consideration thereof, HEAF has not waived any rights that it may have against the undersigned pursuant to the terms of the aforesaid Lender Agreement.

(b)(6)SIGNATURE X -गत

late charge if I fail to pay all or part of a is due or if I fail to provide written evi-efaired as described under Determent each riorar of each tate installment.

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I was a vice only institution to estimate in apply for a Pail Grant, that I have done so or that I have requested my institution to estimate my eligibility for a Pail Grant. I certify that I am a borwhele eligible for participation in the PUS or SLS program and that I do not one a return to any Title IV and program. I furnity contry finith have read the materials explaining the frederal quarknited student loan program which have been provided to me and that I understand my rasponsibilities and my rights under that program,

F DEFERMENT OF PAYMENT

If the estament withouted by the Act, the payments it am required to have as discribed for the February terms twist may be deferred. The instances currently activatized by the Act are its exceptional or the HEAF application information from at this seek such its estament. I discribed to comply with the relevant leaves it requires and the Riese and Regulations of HEAF and deep with the relevant formation for the course formation for example the property of personal training and personal responsible for payment of interest during any personal payment which my tender may tay collection a cervice basis, or the add to the proposition are not like can

G. FORBEARANCE

If this unable to receyting tight accordance with the torus established under Receytings in this Notin. I may recent the tender to freely these terms of indicated that such models of a visual complete the tenders upport and would have to be in completing with Act. Total information of the proposed of the Act and the Bules and Regulations of HEAR Tuncers and the Bules and Regulations of HEAR Tuncers also with the modification of recognised terms under this Section is officient from Defigired as dear of social or this fixed and that during this period tiwit remark resubmissible respansificant or interest. Here, is the leaser may lot scalled from the on a periodic bat. In 16th and locate pre-ביאו במיוים אי וייאם באים בי

SCHOOL CERTIFICATION.

I hereby carrily that the student raimed in Section A or this application is eccepted for enrollment or is errolled as at least a half-time student, and a making satisfactory progress in a program determined to be eligible for this loan program. I further control that the studea program determined to be eligible for this kyan program. Further cardly that the study has been determined by this institution, under the regulations applicable to this loen program, to be eligible for the loen applied for I further certify inat based upon secretary available at this institution and also inquiry to the student the student has satisfied the requirements under the Selective for the secretary in the student has satisfied the requirements under the Selective for the secretary in cable provisions of federal law and the rules, regulations, policies, and procedures of HEAF in the administration of this loan. The information provided in Sections A and B and this School Certification is true, complete, and correct to the best of my knowledge and before.



OAN DISCHARGE APPLICATION: UNPAID REFUND derail Family Education Loan Program / William D. Ford Fedoral Direct Loan Program

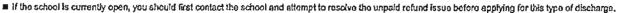
OMB No. 1845-0058 Form Approved Exp. Data 12/31/2007

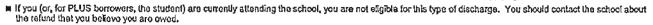
WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents will be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

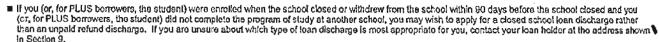
SECTION 1: BORROWER IDENTIFICATION	
0.1.2	Please enter or correct the following information;
1 4/6/9	SSN (b)(6)
$\sim 1) \setminus J \setminus J$	Name (b)(6)
() (Address City, State, Zip (b)(6)
v	Telephone – Home (b)(6)
	Telephone - Other ()
	E-mail (optional)
SECTION 2: SCHOOL AND LOAN INFORMATION	
owes you a refund is currently open, you should first contact the school to atter are a student borrower applying for loan discharge, begin with Item 3a. If you	ons and other information on the following page. If the school that you believe mpt to resolve this issue before applying for an unpeld refund loan discharge. If you are a parent borrower applying for a PLUS loan discharge, begin with Ilom 1.
(b)(6)	2. Student's SSN:
3a. School's name:	3b. School's address (street, city, state, zip):
ROBELT France Hair Design	3b. School's address (street, city, state, zip): 2435 974nd Con Caws & Brunx my loub 5. If this school is closed, were you (or, for PLUS borrowers, was the student)
4. Is this school still open? Yes No Don't Know	attending the school when it closed? Yes No
6a. Do you have any other pending or approved application(s) for discharge of	78
requesting a dischargo, or is such a refund or payment being considered?	-
for each discharge, refund or payment, if known. Use a separate sheet of p	rer to Item 6a or 6b is "Yes," provide the information requested in Items 7a, 7b, and 7c aper if you need to report more than one discharge, refund or payment.
7a. Reason for discharge, refund or payment:	
7b. From whom did you request the discharge, refund or payment (include tele	phone number)?
7c. Amount you received or that you expect to receive: \$	
_ ·	
SECTION 3: REFUND INFORMATION	
shown in the documentation from the school is correct, skip to Section 4. If you	apaid refund, attach a copy to this form. If you believe that the amount of the refund a don't believe that the amount is correct or if you don't have this documentation, a find market the amount is correct or if you don't have this documentation,
If you have documentation from the school showing the amount of the un shown in the documentation from the school is correct, skip to Section 4. If you complete Items 8 through 13. If you are unable to provide any of the requested	don't believe that the amount is correct or if you don't have this documentation, information, write "Don't Know."
If you have documentation from the school showing the amount of the un shown in the documentation from the school is correct, skip to Section 4. If you complete items 8 through 13. If you are unable to provide any of the requested	don't believe that the amount is correct or if you don't have this documentation, information, write "Don't Know."
If you have documentation from the school showing the amount of the unshown in the documentation from the school is correct, skip to Section 4. If you complete Items 8 through 13. If you are unable to provide any of the requested 8. What amount do you believe the school owes you? \$ \(\frac{FU}{2} \) \(\frac{H}{2} \) 9. Why do you believe the school owes you this amount?	don't believe that the amount is correct or if you don't have this documentation, information, write "Don't Know."
If you have documentation from the school showing the amount of the unshown in the documentation from the school is correct, skip to Section 4. If you complete items 8 through 13. If you are unable to provide any of the requested 8. What amount do you believe the school owes you? \$ \(\frac{FU}{2} \) \(\frac{H}{2} \) 9. Why do you believe the school owes you this amount?	indom't believe that the amount is correct or if you don't have this documentation, information, write Don't Know." mount Chool and 5 days 1 became
If you have documentation from the school showing the amount of the unshown in the documentation from the school is correct, skip to Section 4. If you complete Items 8 through 13. If you are unable to provide any of the requested 8. What amount do you believe the school owes you? \$ \int \frac{\pmu}{I} \int \frac{\pm}{I}\$ 9. Why do you believe the school owes you this amount? 10. Your (or, for PLUS borrowers, the student's) first and last dates of attendant in the interval of the school of the school ower.	con't believe that the amount is correct or if you don't have this documentation, information, write Don't Know." Thou not not Dissable Chool ONHY 5 days I beame co at the school: OR Never Attended
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SECTION 5: INSTRUCTIONS FOR COMPLETING THE FORM

Before you complete this application, you need to know the following:







When completing this form, type or print using dark ink. For all dates, give month, day (if known), and year. Show dates as MM-DD-YYYY (for example, "July 01, 2005" = "07-01-2005"). If you need more space to answer any of the Items, continue on separate sheets of paper and attach them to this form. Indicate the number of the Item(s) you are answering and include your name and social security number (SSN) on all attached pages. If a refund is owed for more than one student or from more than one school, use separate forms for each student or school.

Return the completed form and any attachments to the address shown in Section 9.

SECTION 6: DEFINITIONS

- The Federal Family Education Loan (FFEL) Program includes Federal Stafford Loans (both subsidized and unsubsidized), Federal Supplemental Loans for Students (SLS), Federal PLUS Loans, and Federal Consolidation Loans.
- The William D. Ford Federal Direct Loan (Direct Loan) Program Includes Federal Direct Stafford/Ford Loans (Direct Subsidized Loans), Federal Direct Unsubsidized Stafford/Ford Loans (Direct Unsubsidized Loans), Federal Direct PLUS Loans (Direct PLUS Loans), and Federal Direct Consolidation Loans (Direct Consolidation Loans).
- Loan discharge due to an unpaid rofund cancels your obligation (and any endorser's obligation) to repay the portion of your loan that should have been refunded. Any accrued interest and other charges on the amount of the unpaid refund will also be discharged, and you will be relimbursed for any amount that you have repaid that exceeds the remaining balance of the loan after the discharge. Your loan holder will report the discharge to all credit reporting agencies to which the loan holder previously reported the status of the loan.
- Program of study means the instructional program leading to a degree or certificate in which you (or, for PLUS between, the student) were enrolled.
- The student (as in for, for PLUS betrowers, the student') refers to the student for whom a parent betrower obtained a Federal PLUS Lean or Direct PLUS Lean.
- Third party refers to any entity that may provide reimbursement for a refund owed by the school, such as a State or other entity offering a tuition recovery program or a holder of a performance bond.

SECTION 7: TERMS AND CONDITIONS FOR LOAN DISCHARGE

- i agree to cooperate with the U.S. Department of Education (the Department) or the Department's designee in any enforcement action related to this application and to provide to the Department or the Department's designee, upon request, other documentation reasonably evailable to me that demonstrates that I meet the qualifications for an unpaid refund discharge.
- I assign and transfer to the Department any right to recovery on the amount discharged that I may have from the school identified in Section 2 of this form and/or any owners, affiliates or assigns of the school, and from any party that may pay claims for a refund because of the actions of the school, up to the amounts discharged by the Department on my loan(s).
- 1 understand that this request may be denied, or my discharge may be revoked, if I fall to cooperate, provide documentation, or meet any of the other terms of my agreement on this form.
- 1 understand that if my loan is discharged based on any false, fictitious, or fraudulent statements that I knowingly made on this form or on any accompanying, documents, I may be subject to civil and criminal penalties under applicable federal law.

SECTION 8: IMPORTANT NOTICES

Privacy Act Notice. The Privacy Act of 1974 (S U.S.C. SS2a) requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you are \$428(b)(2)(A) et seq. and \$451 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1076(b)(2)(A) et seq. and 20 U.S.C. 1087a of seq.) and the authority for collecting and using your Social Security Number (SSN) is \$484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the Federal Family Education Loan (FFEL) Program or the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a foan (such as a deferment, forteerance, discharge, or forgiveness) under the FFEL and/or Direct Loan Programs, to permit the servicing of your loan(s), and, if it becomes necessary, to locally you and to collect on your loan(s) become definquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to coursel you in repayment efforts, to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default, to provide default rate calculations, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit

In the event of fitigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the fitigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions, in circumstances involving employment complaints, griovances, or disciplinary actions, we may disciple the records to adjudicate or investigate the Issues. If provided for by a collective bargatning agreement, we may disciple to adjudicate or investigate the Issues. If provided for by a collective bargatning agreement, we may disciple to adjudicate or investigate the Issues. If provided for by a collective bargatning agreement, we may disciple to a labor organized under 5 U.S.C. Chapter 71. Disciplinary actions the major provided researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0058. The time required to complete this information collection is estimated to average 0.5 hours (30 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for impraving this form, please write to: U.S. Department of Education, Washington, DC 20202-4851.

If you have questions regarding the status of your individual submission of this form, contact your loan holder (see Section 9).

SECTION 9: WHERE TO SEND THE COMPLETED LOAN DISCHARGE APPLICATION

Send the completed loan discharge application and any attachments to: (If no address is shown, return to your loan holder.)

If you need help completing this form, call:



(b)(6)

LOAN DISCHARGE APPLICATION: SCHOOL CLOSURE ()NO

OMB No. 1845-0015 Form Approved Exp. Date 08/31/2008

Federal Family Education Loan Program / William D. Ford Federal Direct Loan Program / Federal Perkins Loan Program

WARNING: Any person who knowingly makes a folso shall	territori or misroprosentation on this form or on any accompanying documents will be subject to
SECTION 1: BORROWER IDENTIFICATION	under the U.S. Criminal Code and 26 U.S.C. 1097.
Robert Figure sir Design Institute # 007515	Pice (b)(6) SSN (b)(6) Name (b)(6) Address (b)(6) Crty, State, Zig Telephone - Home (b)(6) Telephone - Other (E-mull (options))
SECTION 2: STUDENT INFORMATION	
Before completing this section, carefully read the entire form, includi-	ing the instructions, definitions, and terms and conditions in Sections 4, 6, and 6 on this. 3. If you are a parent borrower applying for a PLUS loan discharge, begin with
1. Student's name flest flest middle in Helb. (b)(6) 2. Student's SSN;	10-10-1-90
	WUTTE
3. Closed school's name:	
4. Date school clased (if known): 0 6 1 6 - 1 7 8	Went in Kenson us withour Said int
5. Closed school's address (street, dity, state, zip): 24	and concare of NY, 10168 KODOCKET DIS
6. Cates of affendance at the closed school: From 1 2 2 - 1 7. Name of the program of study that you (or, for PLUS borrowers, the study that you (or, f	3H-1919171701816-161-11918181
\	
8. Did you (or, for PLUS bomovers, the stident) complete the program of a 11 No, check all reasons that apply: The school closed while you (or, for PLUS bomovers, the student) w	
[2] You (or, for PAUS borrowers, the student) withdraw from the school	Ion:
You (or, for PLUS borrowers, the student) were on an approved less	vo of abzonce when the school closed;
From To To	
9. Did you (pr. for PLUS barrowers, the student) complete or are you in the	process of completing the program of study or a comparable program of study at another action?
) 100 j	nt) credit for baining received at the closed school by allowing transfer of credits or hours earned at
~	the program of study over from the beginning at the other school? 🖸 Yes - 🖸 No
 Did the holder of your loan receive enymoney back (a refund) from the If Yes, give the amount and explain why the money was refunded; 	e school on your behall? [] Yes Ko [] Don't Know
11. Oid you (or, for PLUS borrowers, the student) make any monetary class connection with enterliment or attendance at the school? Yes 27	im with, or receive any payment from, the actnool or any third party (see definition in Section 5) in No. [3] Opn't Know — If Yes, please provide the following information:
(a) Namo'addigssubstephene number of the party with whom the daim	
(b) Annount/status of daim;	(c) Amount of payment received: \$ (Write "none" if no payment was received:)
SECTION 3: BORROWER CERTIFICATION	
	onditions that apply to this loan discharge, as specified in Section 6 on the following page, on this form and in any accompanying documentation is true and accounts to the best of
DARmuuaria Signahami	Date: 17/27/89