



Office of Student Financial Aid
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2021-2022 LOAN DISCHARGE (LNDC)

INSTRUCTIONS:

We have been advised that you have had a student loan canceled due to total and permanent disability. In order to reestablish eligibility for the Federal Direct Loan Program, please complete the following:

A. STUDENT INFORMATION

Student Name: _____

U ID Number: _____

SSN (last four): XXX-XX-_____

Phone Number: _____

B. STUDENT ACKNOWLEDGEMENT

"I acknowledge that any new Federal Direct Loans I receive cannot be discharged because of my impairment present when that loan is made, unless the impairment substantially deteriorates so that I am again totally and permanently disabled."

Student Signature: _____ **Date:** _____

C. ATTACH PHYSICIAN'S STATEMENT

Attach a separate signed statement from a physician on official letterhead certifying that you can engage in "substantial gainful activity." **For Title IV aid purposes, the phrase substantial gainful activity means a level of work performed for pay that involves doing significant physical or mental activities or a combination of both. The statement must include the phrase "substantial gainful activity."** Contact information for the physician should be included in case we require additional information. The physician must also sign this form.

D. PHYSICIAN CERTIFICATION

"I acknowledge that I have read section C and understand that the phrase substantial gainful activity means a level of work performed for pay that involves doing significant physical or mental activities or a combination of both. I further acknowledge that I have provided a separate signed statement on official letterhead to the student/school in addition to my signature below."

Physician Signature: _____ **Date:** _____