



Physician's Certification of Borrower's Ability to Engage in Substantial Gainful Activity

The National Student Loan Data System (NSLDS.ed.gov) indicates that you have one or more federal student loans and/or TEACH Grant service obligations discharged because of a total and permanent disability. **Before you can receive additional federal student loans or TEACH Grants, this form must be completed and returned to the Office of Student Aid at the above address.**

Section I (to be completed by Student)

Student's Name (First, Middle Initial, Last): _____

Student's PSU ID Number: _____

Enrollment Semester: (Term and Year): _____
Example: Fall ____/Spring ____ OR Summer ____

Student Signature: _____ Date: _____
(MM/DD/YYYY)

STOP. If you **DO NOT** want to apply for federal student loans, check the box below and do not complete the remainder of this form. If you want to apply for federal loans or a TEACH grant, complete Section II.

I do not want to apply for federal student loans.

Section II (to be completed by Borrower to apply for federal Loans or a TEACH grant)

Instructions

1. Carefully review the Terms and Conditions.
2. Have a Doctor of Medicine or Osteopathy complete and sign Section III.
3. Keep a copy of this form for your records.
4. Return completed form via mail or fax to the Office of Student Aid.

Borrower's Name (First, Middle Initial, Last): _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone Number: _____

Consent for Release of Information

By signing this form I:

1. Authorize any physician, hospital or other institution having records pertaining to the disability for which I had a loan(s) discharged to make information from such records available to the Penn State Office of Student Aid, the U.S. Department of Education, and/or the holder of my loan(s);
2. Acknowledge that any loans or TEACH Grants I receive hereafter cannot be discharged in the future on the basis of any present impairment or condition, unless the impairment or condition substantially deteriorates to the extent that the definition of total and permanent disability is met; and
3. Understand that if I request a new loan or TEACH Grant during the post-discharge monitoring period or conditional discharge period, I must resume payment on the old loan before receipt of the new loan or TEACH Grant.

Borrower Signature: _____

Date: _____
(MM/DD/YYYY)

Section III (to be completed by the certifying Physician)

Physician Instructions:

1. You may complete this form for the borrower only if you are a Doctor of Medicine or Doctor of Osteopathy legally authorized to practice in your state.
2. You are being asked to complete, sign, and date this form to certify whether the borrower does or does not meet the definition of total and permanent disability. Check the box beside the statement applicable to the borrower's condition.

Physician's Certification (check one)

- I certify that in my professional medical judgment, the patient/borrower named above is able to engage in substantial gainful activity (refer to Physician's Instructions).
- In my professional medical judgment of the patient/borrower named above, I CANNOT certify that he/she is able to engage in substantial gainful activity (refer to Physician's Instructions).

Date Borrower became able to work and earn wages: _____
(MM/DD/YY)

Name of Physician: _____

State legally authorized to practice medicine: _____

Phone Number: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Physician Signature (M.D. or D.O.): _____

Physician's license number: _____

Date: _____

General Information

This form is used to obtain a physician's certification and a borrower's acknowledgment. The purpose is to have a licensed physician certify that the borrower is able to engage in substantial gainful activity* and to have the borrower acknowledge that any federal student loans, or any service obligations for TEACH Grants, received as a result of this physician's certification cannot be discharged based on any present impairment or condition, unless that impairment or condition substantially deteriorates to the extent that the definition of total and permanent disability is met. This form will allow the borrower to be considered for new loan(s) under one or more of the following federal loan programs: Direct Subsidized Loan; Direct Unsubsidized Loan; Direct PLUS Loan for parents of dependent undergraduate students and for graduate or professional students; Direct Consolidation Loan; and Federal Perkins Loan.

Total and Permanent Disability is the condition of an individual who:

- is unable to engage in substantial gainful activity* by reason of a medically determinable physical or mental impairment that can be expected to result in death; has lasted for a continuous period of at least 60 months; or can be expected to last for a continuous period of at least 60 months; OR
- has been determined by the Department of Veterans Affairs (VA) to be unemployable due to a service-connected disability.

**Substantial gainful activity is a level of work performed for pay that involves doing significant physical or mental activities or a combination of both.*

The above definition calls for a judgment decision as to the borrower's ability to earn income despite his or her disability. The physician should assess the impact of the borrower's disability on his or her ability to earn income in light of what the borrower would normally be able to earn if he or she were not disabled. If the disability appears to have a significant adverse effect on the borrower's earning potential, not only in the type of work performed before the impairment but for any substantial gainful employment, and the disability is expected to last for a long and indefinite period of time, then the borrower shall be considered totally and permanently disabled under this definition. If, however, the borrower's condition has improved so that the borrower is able to engage in substantial gainful activity or attend an institution of postsecondary education, then the borrower, with appropriate physician's certification and borrower acknowledgement, can be considered for new federal student loans and/or TEACH Grants.

Terms and Conditions

1. If you were granted a final discharge due to total and permanent disability, you are not eligible to receive future TEACH Grants or future loans under the Perkins or Direct Loan programs **unless**:
 - You obtain a certification from a physician that you are able to engage in substantial gainful activity; and
 - You sign a statement acknowledging that the new loan or TEACH Grant service obligation cannot be discharged in the future on the basis of any injury or illness present at the time the new loan or TEACH Grant is made, unless your condition substantially deteriorates so that you are again totally and permanently disabled.
2. If you are granted a conditional discharge based on a total and permanent disability and you request a new TEACH Grant or new loans under the Perkins or Direct Loan programs during the conditional discharge period, you are not eligible to receive the new loan or TEACH Grant **unless**:
 - You obtain a certification from a physician that you are able to engage in substantial gainful activity;
 - You sign a statement acknowledging that neither the previous conditionally discharged TEACH Grant service obligation or loan(s) nor the new loan or TEACH Grant service obligation can be discharged in the future on the basis of any injury or illness present when you applied for a total

- and permanent disability discharge or at the time the new loan or TEACH Grant is made, unless your condition substantially deteriorates so that you are again totally and permanently disabled;
- You sign a statement acknowledging that the conditionally discharged loan(s) or TEACH Grant service obligation will be removed from conditional discharge status; and
 - The Department has removed the conditionally discharged loan(s) or TEACH Grant service obligation from conditional discharge status.