

## 2011-2012 DISABILITY DISCHARGE CERTIFICATION

Financial Aid

Student	: Name: ID #: Z	
ally fun disabilit (FAFSA	fational Student Loan Data System (NSLDS) records indicate that you handed educational loan which has received a final discharge due to total ty. In order to continue processing your Free Application for Federa A), please check the appropriate box(es) below to indicate your decision reawarding for the 2011-2012 aid year.  By signing below, I certify that I do not wish to borrow a new federally tional loan for the 2011-2012 aid year.	and permanent al Student Aid egarding finan-
	tional road the 2011 2012 and year.	
	By signing below, I certify that I am seeking a new federally funded educational loan for the 2011-2012 aid year, and that I understand this loan may not be discharged unless the disabling condition substantially deteriorates.	
	To meet the requirements to qualify for a new loan, you must also provide a signed statement from a physician, stating that you are sufficiently physically recovered to be capable of attending school, successfully completing a program of study and securing new employment in order to repay the new loan you are seeking. (This letter only needs to be submitted once during your enrollment at ORU.)	
	I am submitting a physician's letter with my Disability Discharge Co	ertification.
	I previously submitted a physician's letter for thea	iid year.
Student's signature Date		

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