



## Financial Aid Office

### 2024-2025 Student Statement

Student Name: \_\_\_\_\_ Student SSN: \_\_\_\_\_

**Instructions for Student:** You are being asked to complete and sign this form to certify that you, whose loan(s) were previously discharged due to a total and permanent disability, are presently able to engage in substantial gainful activity because your disabling condition or impairment has substantially improved. If a borrower whose prior loan was discharged due to a total and permanent disability wishes to take out another FSA loan, he/she must obtain a physician's certification\* that he/she has the ability to engage in substantial gainful activity, and he/she must sign a statement that he/she is aware the new FSA loan can't later be discharged for any present impairment unless it deteriorates so that he/she is again totally and permanently disabled.

\* The student only needs to obtain the physician certification once; the school keeps a copy of it in the student's file. But the school must collect a new borrower acknowledgment from the student each time he receives a new loan.

My, \_\_\_\_\_, impairment(s) has improved sufficiently to allow me to

**Borrower's Name**

engage in substantial gainful activity. The phrase "substantial gainful activity" generally describes a situation in which a borrower is sufficiently physically recovered to be capable of attending school, successfully completing a program of study, and securing employment in order to repay the new loan the borrower is seeking.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Name (printed): \_\_\_\_\_

1300 Eagle Road St. Davids, PA 19087-3696

610.225-5102 fax 610.225.5651 www.eastern.edu