

financialaid@clarkstate.edu • 937-328-6034

2025-26 Certification of Total and Permanent Disability Discharge

The Financial Aid Office received the Free Application for Federal Student Aid (FAFSA) you submitted for the 2025-2026 academic year. It was reported on the FAFSA that one or more of your federal student loans have been discharged due to permanent and total disability. Please complete and provide the information requested below. The information must be confirmed before financial aid can be awarded.

SECTION A: Student Informati	on			
Name:	Stuc	Student ID Number:		
Address:	City:	State:	Zip:	
Family Education Loan Progra	ditionally discharged an obliga m loans (FFELP) or Federal Dir new loans for which I may apply claimed circumstances or imp	ect Loans due to permar y and receive, cannot be	nent and total	
	required): an certifying that my disability of the such as working or attending	·	n engaging in	
-	on Statement on on this form and accompany more, I affirm that I have not kno	_	·	
Student Signature:		Date:		
Acceptable signature formats an image representation of you		s, signatures made using	a stylus or finger or	
MAIL FORM TO: Clark State College, Financial A	id Office			
570 F Leffel Lane Springfield	Ohio 45505			