



## 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 Information

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

**Having requested and had conditionally discharged an obligation for repayment of previous Federal Family Education Loan Program loans (FFELP) or Federal Direct Loans due to permanent and total disability, I do affirm that any new loans for which I may apply and receive, cannot be cancelled in the future based on the previously claimed circumstances or impairment.**

#### I have attached the following (required):

- A letter from my physician certifying that my disability does not prevent me from engaging in substantial gainful activity such as working or attending school.

### SECTION B: Student Certification Statement

I certify that all of the information on this form and accompanying documents are true and complete to the best of my knowledge. Furthermore, I affirm that I have not knowingly or intentionally provided any false or fraudulent documentation.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Acceptable signature formats include hand-written signatures, signatures made using a stylus or finger or an image representation of your signature.**

#### MAIL FORM TO:

Clark State College, Financial Aid Office  
570 E. Leffel Lane, Springfield, Ohio 45505  
financialaid@clarkstate.edu • 937-328-6034