



100 Arend & Nancy Lubbers Student Services Center
One Campus Dr., Allendale, MI 49401
Phone: 616.331.3234 • Fax: 616.331.3180

2019-2020 Certification Regarding Disability

Student Name: _____ **Student ID Number: G** _____

By signing below, you acknowledge that any new Federal Student Loan cannot later be discharged for any present impairment unless it deteriorates so that you are again totally and permanently disabled. If your prior loan was conditionally discharged, and the conditional period has not elapsed, you are affirming by signing below that collection will resume on the conditionally discharged loan. Furthermore, unless your condition substantially deteriorates, the prior loan cannot be discharged in the future for any impairment present when the conditional discharge was granted or when you requested the new loan.

Student Signature: _____ **Date:** _____

Please return your completed form to the Office of Financial Aid & Scholarships by fax, U.S. mail, or in person. Be sure to include your name and G Number on all pages. Missing information may delay processing.