

Loan Information Form Instructions Kansas State Loan Repayment Program

Please complete one Loan Information Form for each loan you wish the Kansas State Loan Repayment Program (SLRP) to consider for repayment.

Attach to this form

- a copy of the original loan agreement and application
- promissory notes
- disclosure statements
- statements from the current holder indicating the borrower's name, original amount borrowed, date of original disbursement, and type of loan.

In addition, include a current account statement showing your loan balance.

Information on the necessary components of these items is available on the Kansas State Loan Repayment Program website <http://www.kdheks.gov/olrh/FundLoan.html>. Applications without the required loan documents will be ineligible.

If you have consolidated your loans for undergraduate and graduate education costs, you must attach a copy of the loan documents for health professions education costs that were consolidated into a new loan. You may fill out one loan form for the consolidation, but you must list on a separate sheet of paper the original date and amount of each educational loan, including the original disbursement date, the amount, and the loan type.

If an eligible educational loan is consolidated or refinanced with any debt other than an educational loan of the applicant, no portion of the consolidated/refinanced loan will be eligible for loan repayment.

Loan Information Form
State Loan Repayment Applicant Information

Applicant Information

Name (Last, First, Middle) _____, _____, _____
Social Security Number _____ - _____ - _____ Date of Birth _____

Lending Institution Information

Lending Institution Name _____ Loan Account No. _____
Address _____
City _____ State _____ Zip _____ Phone _____
Is this a consolidated loan? _____ Academic Period covered by the Loan _____
Original Date of the Loan _____ Original Amount of the Loan \$ _____
Current Balance (Principal & Interest) \$ _____ as of (date) _____ Interest Rate _____
Purpose of the Loan as Indicated on the Loan Application _____

Type of Loan (e.g., GSL, NDSL, HEAL) _____

Was the loan sold? (If you are not sure, check with your lender) _____

If "yes," give the secondary loan holder's name and full address

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

If the answer is yes to either of the following questions, please provide detailed information on a separate sheet of paper.

Loan in Default? _____ If so, date of default _____

Loan under a Federal Court Judgment? _____ If so, date of the judgment _____

I hereby certify to the accuracy of the above information and that I am only applying for Kansas State Loan Repayment of loans incurred solely for the costs of education, including reasonable living expense, leading to a degree in an eligible profession.

Signature of Applicant

Date

Kansas State Loan Repayment Program
Request to Release Personally Identifiable and Confidential Information

Please complete one form for each lending institution with a loan for which you are seeking Kansas State Loan Repayment Program repayment assistance.

I _____ hereby authorize the Kansas Department of Health and Environment to receive any requested information concerning my application(s) for student loans and other information pertinent to my application for the Kansas State Loan Repayment Program. The institution or agency directed to release information to the Kansas Department of Health and Environment is listed below.

Lender/Guaranty Agency/Loan Servicer _____

Signature of Applicant

Date

Social Security Number