



IBIC

INCOME-BASED REPAYMENT (IBR) / INCOME CONTINGENT REPAYMENT (ICR) REQUIRED DOCUMENTATION

Records Code: IBRDF-XIBR Version Date: 07/26/10

BORROWER NAME: _____ ACCOUNT NUMBER: _____

REQUIRED DOCUMENTATION

Provide all required documentation listed below, as appropriate, to request the IBR or ICR plan. If you are currently in a period of deferment or forbearance and are requesting to enter the IBR/ICR plan before the deferment or forbearance period ends, complete the Request to End Deferment/Forbearance form. Failure to provide any of the required documentation may result in your request being denied.

Table with 2 columns: IF YOU... and THEN PROVIDE... containing various conditions and required documents like 'signed Repayment Plan Selection form' and 'signed copy of your most recently filed federal income tax return'.

* If you filed a joint return, both spouses' signatures must be present. If you select ICR, are married, and you and your spouse file separate federal income tax returns, you must also submit a signed copy of your spouse's most recently filed federal income tax return.

SPOUSAL INFORMATION

Check this box only if you are married and file a joint federal income tax return, and your spouse has loans that are eligible for repayment under the IBR plan. If you check this box, please complete the information below. This information is required so we can determine your spouse's eligible loan amount and accurately calculate your IBR payment amount.

Spouse's Full Name (Last, First, Middle Initial)

Spouse's Social Security Number

Spouse's Date of Birth

Spouse's Signature

Borrower's Signature



William D. Ford Federal Direct Loan Program

REPAYMENT PLAN SELECTION

William D. Ford Federal Direct Loan Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form will be subject to penalties that may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

Instructions

Read the enclosed information carefully to understand your repayment options and then complete this form to select a repayment plan or to change your previous repayment plan. **Please print clearly using blue or black ink.**

If you need help completing this form, contact your servicer through one of the options provided in Section 6 on the back of this form. **Return the completed form to the address shown in Section 6.**

Section 1: Borrower Information – to be completed by ALL BORROWERS

Borrower's Last Name Borrower's First Name Borrower's Middle Initial Borrower's Social Security Number:

Section 2: Repayment Plan Selection – to be completed by ALL BORROWERS

Place an "X" in the box under the repayment plan that you wish to select for each type of loan that you owe. The enclosed information describes each of the repayment plans. You must choose the same repayment plan for all of your Direct Loans, unless you have both parent Direct PLUS Loans (Direct PLUS Loans you received as a parent to pay for the education of a dependent student) and one or more of the other types of Direct Loans listed below (Direct Subsidized Loans, Direct Unsubsidized Loans, Direct Consolidation Loans, and student Direct PLUS Loans (Direct PLUS Loans you received to pay for your own graduate or professional education)), and you want to repay your Direct Subsidized Loans, Direct Unsubsidized Loans, Direct Consolidation Loans, and/or student Direct PLUS Loans under the Income Contingent Repayment (ICR) Plan or Income-Based Repayment (IBR) Plan. In that case, you must select a different repayment plan for your parent Direct PLUS Loans. You may repay any Direct Consolidation Loan (except for a Direct PLUS Consolidation Loan) under the ICR Plan, but a Direct PLUS Consolidation Loan or a Direct Consolidation that repaid parent PLUS loans may not be repaid under the IBR Plan.

- You may not repay parent Direct PLUS Loans under the ICR or IBR Plan.
- To be eligible to repay your loans under the IBR Plan, you must have a partial financial hardship (see Section 5 of this form).

Loan Types	Standard	Graduated	Extended		Income Contingent	Income-Based
Direct Subsidized Loans Direct Unsubsidized Loans Direct Consolidation Loans Student Direct PLUS Loans	<input type="checkbox"/>	<input type="checkbox"/>	Fixed Payments <input type="checkbox"/>	Graduated Payments <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent Direct PLUS Loans Direct PLUS Consolidation Loans	<input type="checkbox"/>	<input type="checkbox"/>	Fixed Payments <input type="checkbox"/>	Graduated Payments <input type="checkbox"/>	Not Available	Not Available

Section 3: Spouse Information – to be completed by SOME MARRIED BORROWERS

If you are married, complete this section only if you are (1) selecting the ICR Plan (unless you are separated from your spouse), (2) selecting the IBR Plan and you and your spouse file your federal income taxes jointly, or (3) selecting any repayment plan for a Direct Consolidation Loan held jointly by you and your spouse.

Spouse's Last Name Spouse's First Name Spouse's Middle Initial Spouse's Social Security Number:

Section 4: Additional ICR Information – to be completed by BORROWERS WHO SELECT ICR

Complete this section only if you are selecting the ICR Plan.

Note: To repay under the ICR Plan, you must complete a consent to disclosure of tax information form or provide other documentation of your adjusted gross income, as required by your servicer. You may also be required to complete an ICR & IBR Plan Alternative Documentation of Income form. We have enclosed the required form(s). Please complete and return the enclosed form(s) and/or documentation along with this Repayment Plan Selection form. If you do not submit the required form(s) or other documentation, you will be placed on the Standard Repayment Plan (unless you were previously on another Direct Loan repayment plan).

When you begin repaying your loan under ICR, your initial payment amount will be the full amount of interest that accumulates on your loan each month. If you cannot afford the initial interest payment, you may request a forbearance until you are notified of your actual ICR payment.

During a forbearance you are not required to make any payments of principal or interest, but interest continues to accumulate on your loan. If you are beginning repayment of your Direct Loan for the first time, interest that you do not pay during the forbearance will be capitalized (added to your outstanding principal balance) at the end of the forbearance. Capitalization increases your loan's principal amount, and therefore the total amount of interest you will repay on your loan. If you are requesting a change from another Direct Loan repayment plan to the ICR Plan, you may receive a forbearance for up to 60 days during which unpaid interest will not be capitalized. During the 60-day period, you will have to provide us with the information that we need to calculate your payment amount under ICR. To request a forbearance, contact your servicer through one of the options provided on your billing statements.

A. Family Size. Enter your family size on the line below. Your family size number includes you and your spouse. It includes your children if they get more than half their support from you. It includes other people only if: (1) they now live with you, **and** (2) they now get more than half their support from you **and** they will continue to get this support from you. **Support** includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc. **If your family size number changes, notify your servicer in writing at the mailing address or the Web site address shown in Section 6.**

Family Size: _____

B. ICR Joint Repayment Option. If you and your spouse each have Direct Loans and both of you want to repay the loans under the ICR Plan, you may choose to repay your loans jointly (see ICR Plan description in the enclosed Repayment Plan Choices sheet). If you choose to repay jointly, place an "X" in the box below and have your spouse sign and date this form.

I wish to repay my loan(s) jointly with my spouse under the ICR Plan.

C. Certification. Read the certification statement below, then sign and date this form. If you selected the ICR Joint Repayment Option (see "B", above), your spouse must also sign and date this form.

All of the information I provided on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to provide proof of the information that I have provided on this form.

Borrower's Signature _____ Date _____

Spouse's Signature (if required) _____ Date _____

Section 5: Additional IBR Information – to be completed by BORROWERS WHO SELECT IBR

Complete this section *only* if you are selecting the IBR Plan.

To repay under the IBR Plan, you must have a **partial financial hardship**. You are considered to have a partial financial hardship if the annual amount due on all of your eligible loans, as calculated under a standard repayment plan with a 10-year repayment period, is more than 15% of the difference between your adjusted gross income (AGI) and 150% of the poverty guideline amount for your family size and state. (If you are married and file a joint federal tax return with your spouse, your AGI includes both your income and your spouse's income.) Eligible loans for the IBR Plan are Direct Subsidized Loans, Direct Unsubsidized Loans, Direct Consolidation Loans that did not repay parent PLUS loans, student Direct PLUS Loans, Federal Family Education Loan (FFEL) Stafford Loans, and student FFEL PLUS Loans, and FFEL Consolidation Loans that did not repay parent PLUS loans. If you have both Direct Loans and FFEL loans, your total eligible loan debt will be considered when determining partial financial hardship. The following loans are **not** eligible for IBR: Direct PLUS Consolidation Loans, parent Direct PLUS Loans, parent FFEL PLUS Loans, Direct Consolidation Loans or FFEL Consolidation Loans that repaid parent PLUS loans, and loans on which you are in default.

To enroll in the IBR Plan, you must complete a consent to disclosure of tax information form or other documentation of your AGI, as required by your loan holder. You may also be required to complete an ICR & IBR Plan Alternative Documentation of Income form. We have enclosed the required form(s). Please complete and return the enclosed form(s) and/or documentation along with this Repayment Plan Selection form. If you do not submit the required form(s) or other documentation, you will be placed on the Standard Repayment Plan (unless you were previously on another Direct Loan repayment plan).

If you select the IBR Plan, you must continue to make payments on your loan(s) under your current repayment plan until we receive all the necessary information to determine your eligibility for the IBR Plan and your IBR payment amount. If you are unable to make your loan payments under your current repayment plan while we are determining your eligibility for IBR and your IBR payment amount, you may request a forbearance. During a forbearance you are not required to make any payments of principal or interest, but interest continues to accumulate on your loan. If you are beginning repayment of your Direct Loan for the first time, interest that you do not pay during the forbearance will be capitalized (added to your outstanding principal balance) at the end of the forbearance. Capitalization increases your loan's principal amount, and therefore the total amount of interest you will repay on your loan. If you are requesting a change from another Direct Loan repayment plan to the IBR Plan, you may receive a forbearance for up to 60 days during which unpaid interest will not be capitalized. During the forbearance, you will have to provide us with your income information that we need to calculate your payment amount under IBR. To request a forbearance, contact your servicer at 1-800-699-2908, Monday through Friday 8:00 am to 8:30 pm (ET). Individuals who use a telecommunications device for the deaf (TDD) may call 1-800-722-8189.

A. Family Size. Enter your family size on the line below. Your family size is determined by counting you, your spouse, and your children, including children who will be born during the year you certify your family size, if your children receive more than half their support from you. Your family size also includes other individuals if, at the time you certify your family size, these other individuals (1) live with you and (2) receive more than half of their support from you and will continue to receive this support for the year you certify your family size. Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, and payment of college costs. **If you select IBR, you must notify us of your family size every year. The Department will contact you annually by mail to confirm and update family size information.**

Family Size: _____

If you have any questions regarding the IBR Plan, partial financial hardship, or your family size determination, please contact your servicer (see Section 6 below).

B. Eligible Loans. Direct Subsidized Loans, Direct Unsubsidized Loans, Direct Consolidation Loans that did not repay parent PLUS loans, student Direct PLUS Loans, Federal Family Education Loan (FFEL) Stafford Loans, student FFEL PLUS Loans, and FFEL Consolidation Loans that did not repay parent PLUS loans are eligible for repayment under the IBR Plan. Direct PLUS Consolidation Loans, parent Direct PLUS Loans, parent FFEL PLUS Loans, Direct Consolidation Loans or FFEL Consolidation Loans that repaid parent PLUS Loans, and loans on which you are in default are not eligible for IBR. Your IBR payment amount will be based on your total eligible loan debt.

C. IBR Joint Consolidation Loan Repayment. If you and your spouse have an eligible joint consolidation loan that you want to repay under the IBR Plan, place an "X" in the box below and have your spouse sign and date below in Section D. Both you and your spouse must have a partial financial hardship to repay an eligible joint consolidation loan under IBR (see description of partial financial hardship above).

I wish to repay my joint consolidation loan(s) with my spouse under the IBR Plan.

D. Certification. Read the certification statement below, then sign and date this form. If you want to repay a joint consolidation loan under the IBR Plan (see "C", above), your spouse must also sign and date this form.

All of the information I provided on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to provide proof of the information that I have provided on this form.

Borrower's Signature _____

Date _____

Spouse's Signature (if required) _____

Date _____

Section 6: Where to Send the Completed Form

Return this form to:

U.S. Department of Education
FedLoan Servicing
P.O. Box 69184
Harrisburg, PA 17106-9184

If you need help completing this form, or if you need to report a change in your address:

- Call us at **1-800-699-2908** or, if you use a telecommunications device for the deaf (TDD), at **1-800-722-8189**.
- E-mail us by going to **www.myfedloan.org**.
- Write to us at the mailing address provided above.

PRIVACY ACT NOTICE

The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authority for collecting the requested information from and about you is §451 *et seq.* of the Higher Education Act (HEA) of 1965, as amended (20 U.S.C. 1087a *et seq.*) and the authorities for collecting and using your Social Security Number (SSN) are §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) and 31 U.S.C. 7701(b). Participating in the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forbearance, discharge, or forgiveness) under the Direct Loan Program, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect and report on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed, on a case-by-case basis or under a computer-matching program, to third parties as authorized under routine uses in the appropriate systems of records notices. The routine uses of this information include, but are not limited to, its disclosure to federal, state, or local agencies, to private parties such as relatives, present and former employers, business and personal associates, to consumer reporting agencies, to financial and educational institutions, and to guaranty agencies in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default. To provide default rate calculations, disclosures may be made to guaranty agencies, to financial and educational institutions, or to state agencies. To provide financial aid history information, disclosures may be made to educational institutions. To assist program administrators with tracking refunds and cancellations, disclosures may be made to guaranty agencies, to financial and educational institutions, or to federal or state agencies. To provide a standardized method for educational institutions to efficiently submit student enrollment status, disclosures may be made to guaranty agencies or to financial and educational institutions. To counsel you in repayment efforts, disclosures may be made to guaranty agencies, to financial and educational institutions, or to federal, state, or local agencies.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may be made to our contractors for the purpose of performing any programmatic function that requires disclosure of records. Before making any such disclosure, we will require the contractor to maintain Privacy Act safeguards. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

PAPERWORK REDUCTION NOTICE

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0014. The time required to complete this information collection is estimated to average .33 hours (20 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. **If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, DC 20202-4537. **Do not send the completed form to this address.**

If you have questions about the status of your individual submission of this form, contact your servicer (see Section 6).



William D. Ford Federal Direct Loan Program

Income Contingent Repayment Plan & Income-Based Repayment Plan Alternative Documentation of Income

William D. Ford Federal Direct Loan Program

Federal Direct Stafford/Ford Loans, Federal Direct Unsubsidized Stafford/Ford Loans,

Federal Direct Subsidized Consolidation Loans, Federal Direct Unsubsidized Consolidation Loans

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to penalties which may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

OMB No. 1845-0016
Form Approved
Exp. Date 06/30/2012

Section 1: Identifying Information

Before completing this form, carefully read the instructions in Section 5.

All borrowers must provide the Borrower Information below.

Borrower Information:

Borrower's Name (please print clearly):

Last Name First Name Middle Initial

Borrower's Social Security Number:

____-____-____

If you are married, you must also provide the Spouse Information below if (1) you are repaying under the ICR Plan, or (2) you are repaying under the IBR Plan and you and your spouse file a joint federal tax return.

Spouse Information:

Your Spouse's Name (please print clearly):

Last Name First Name Middle Initial

Your Spouse's Social Security Number:

____-____-____

Section 2: Borrower's Income Information – to be completed by ALL BORROWERS

All borrowers must complete this section.

You must list all taxable income you are currently receiving (i.e., income from employment, unemployment income, dividend income, interest income, tips, alimony). Include the amount of money received, how often you receive this money, and your employer (if any) or the source of your income if you are not employed. You must attach supporting documentation for **all income** reported in this section (e.g., pay stubs, letters from your employer stating your income, interest or bank statements, dividend statements, canceled checks, or, when these forms of documentation are unavailable, a signed statement explaining your income source(s) and giving the addresses of these sources). Copies are acceptable, but **all supporting documentation must be no more than 90 days old**. If you have more than two sources of income, provide the information requested in this section on a separate piece of paper and mail it with this form. Do not report untaxed income such as Supplemental Security Income, child support, or federal or state public assistance. If your income or the income of your spouse changes significantly after your submission of this form, you must notify your servicer of this change (see contact information in Section 5).

Amount of Income	Frequency of Payment (Please check the appropriate box.)					Employer or Source of Income
	Weekly	Bi-weekly	Semi-monthly	Monthly	Yearly	
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Check this box if you do not have any taxable income and receive only untaxed income such as Supplemental Security Income, child support, or federal or state public assistance.						

Section 3: Spouse's Income Information – to be completed by SOME MARRIED BORROWERS

If you are married, you must provide your spouse's income information if:

1. You are repaying under the ICR Plan, or
2. You are repaying under the IBR Plan and you and your spouse file a joint federal tax return.

If you are required to complete this section, you must provide the same information and supporting documentation for your spouse's income that is required for your own income, as explained above in Section 2.

Amount of Income	Frequency of Payment (Please check the appropriate box.)					Employer or Source of Income
	Weekly	Bi-weekly	Semi-monthly	Monthly	Yearly	
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
\$	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Check this box if your spouse does not have any taxable income and receives only untaxed income such as Supplemental Security Income, child support, or federal or state public assistance.						

Section 4: Certification and Signature

All borrowers must complete this section. If you are married, your spouse must sign and date below **only** if (1) you are repaying under the ICR Plan, or (2) you are repaying under the IBR Plan and you and your spouse file a joint federal tax return.

Certification: I certify that all of the information reported in Section 2 and, if applicable, Section 3 is true and complete to the best of my knowledge. I agree to provide to the U.S. Department of Education (the Department) on an annual basis (or as required by the Department) alternative documentation of my income for the purpose of determining my appropriate repayment amount under the ICR Plan or IBR Plan. I understand that (1) if I do not provide this information the Department will base my ICR or IBR amount on my AGI, as reported by the IRS, or, in some instances, I will not be allowed to repay my loan(s) under the ICR or IBR Plan; (2) the Department may request my income information from the IRS even if alternative documentation of my income is accepted; and (3) if I am married, my spouse's income information, documentation, and signature are also required if I am repaying under the ICR Plan, or if I am repaying under the IBR Plan and my spouse and I file a joint federal tax return.

Borrower's Signature

Date of Borrower's Signature

Spouse's Signature

Date of Spouse's Signature

Section 5: Instructions and Where to Send the Completed Form

INSTRUCTIONS:

YOU ARE REQUIRED to complete this form if you are repaying your Direct Loans under the Income Contingent Repayment (ICR) or the Income-Based Repayment (IBR) Plan and:

- You are in your first year of repayment;
- You are in your second year of repayment and have been notified that alternative documentation of your income is required; or
- You have been notified that the Internal Revenue Service (IRS) is unable to provide the U.S. Department of Education (the Department) with your Adjusted Gross Income (AGI) or that of your spouse (if applicable).

YOU MAY complete this form if:

- You are repaying your Direct Loans under the ICR Plan and your AGI (and your spouse's AGI, if you are married), as reported on your most recently filed federal tax return, does not reasonably reflect your current income (e.g., due to circumstances such as loss or change in employment by you or your spouse).
- You are repaying your Direct Loans under the IBR Plan and your AGI (and your spouse's AGI, if you and your spouse file a joint federal tax return), as reported on your most recently filed federal tax return, does not reasonably reflect your current income (e.g., due to circumstances such as loss or change in employment by you or your spouse).

In cases where alternative documentation of your income is used, the amount of your monthly payment under the ICR or IBR Plan is based on the current income information you and your spouse (if applicable) provide and is reevaluated annually. Your monthly payment may be adjusted more frequently than annually if you notify your servicer that your AGI (or your spouse's AGI, if you file a joint federal tax return) has changed significantly since your most recent submission of this form and you provide supporting documentation showing this change. To submit alternative documentation of your income, you must attach the required documentation, complete and sign this form, and return it to the address below. If you are married, your spouse must also complete and sign the applicable sections of this form and submit the required documentation if (1) you are repaying your loans under the ICR Plan, or (2) you are repaying your loans under the IBR Plan and you and your spouse file a joint federal tax return. If you need assistance, please call **1-800-699-2908**, or TDD **1-800-722-8189**.

Return this form to:

**U.S. Department of Education
FedLoan Servicing
P.O. Box 69184
Harrisburg, PA 17106-9184**

If you need assistance in completing this form, call **1-800-699-2908**. Individuals who use a telecommunications device for the deaf (TDD) may call **1-800-722-8189**.

Section 6: Important Notices

PRIVACY ACT NOTICE

The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authority for collecting the requested information from and about you is §451 et seq. of the Higher Education Act (HEA) of 1965, as amended (20 U.S.C. 1087a et seq.) and the authorities for collecting and using your Social Security Number (SSN) are §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) and 31 U.S.C. 7701(b). Participating in the William D. Ford Federal Direct Loan (Direct Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forbearance, discharge, or forgiveness) under the Direct Loan Program, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect and report on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

The information in your file may be disclosed, on a case-by-case basis or under a computer-matching program, to third parties as authorized under routine uses in the appropriate systems of records notices. The routine uses of this information include, but are not limited to, its disclosure to federal, state, or local agencies, to private parties such as relatives, present and former employers, business and personal associates, to consumer reporting agencies, to financial and educational institutions, and to guaranty agencies in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default. To provide default rate calculations, disclosures may be made to guaranty agencies, to financial and educational institutions, or to state agencies. To provide financial aid history information, disclosures may be made to educational institutions. To assist program administrators with tracking refunds and cancellations, disclosures may be made to guaranty agencies, to financial and educational institutions, or to federal or state agencies. To provide a standardized method for educational institutions to efficiently submit student enrollment status, disclosures may be made to guaranty agencies or to financial and educational institutions. To counsel you in repayment efforts, disclosures may be made to guaranty agencies, to financial and educational institutions, or to federal, state, or local agencies.

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may be made to our contractors for the purpose of performing any programmatic function that requires disclosure of records. Before making any such disclosure, we will require the contractor to maintain Privacy Act safeguards. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0016. The time required to complete this information collection is estimated to average 0.33 hours (20 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. **If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, DC 20202-4537. **Do not send the completed form to this address.**

If you have questions about the status of your individual submission of this form, contact your servicer at the following address:

**U.S. Department of Education
FedLoan Servicing
P.O. Box 69184
Harrisburg, PA 17106-9184**



**INCOME-BASED REPAYMENT (IBR) /
INCOME CONTINGENT REPAYMENT (ICR)
REQUEST TO END DEFERMENT/FORBEARANCE**

Records Code: IBRDF-XIBR Version Date: 06/01/10
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BORROWER NAME: _____

ACCOUNT NUMBER: _____

I am requesting to have my deferment/forbearance terminated on my eligible loan(s) for the purpose of allowing FedLoan Servicing to process my request for IBR/ICR.

I understand that I am only requesting the termination of my current deferment/forbearance if I qualify for the requested repayment plan. I also understand that if my current deferment / forbearance is ended, any unpaid accrued interest will be capitalized (added to the balance) and my loan(s) will be placed into repayment.

Borrower's Signature

Date