

Discharge Application: Total and Permanent Disability

READ THIS FIRST: This is an application for a Total and Permanent Disability discharge of your Higher Education Servicing Corporation (HESC) private student loan(s). A loan that is 180 days or more past due or that is no longer serviced at HESC will not be eligible for discharge.

To qualify for this discharge, a physician must certify in Section 5 of this form (1) that you are currently unable to engage in any Substantial Gainful Activity (see definition in Section 6) by reason of a medically determinable physical or mental impairment that (A) can be expected to result in death; (B) has lasted for a continuous period of not less than 60 months; or (C) can be expected to last for a continuous period of not less than 60 months, and (2) if you have previously received a discharge of a HESC private student loan(s), the approximate date as of which you became Totally and Permanently Disabled. Please carefully read this application form as HESC's disability standard may differ from disability standards used by other Lenders or federal and state agencies. If you need help completing this application, please call 1-800-366-4372.

If you are a veteran, you will be considered Totally and Permanently Disabled for purposes of this discharge if you provide documentation from the U.S. Department of Veterans Affairs (VA) showing that you are currently **unemployable due to a service-connected disability** and, if you have previously received a discharge of a HESC private student loan(s), the approximate date as of which you became unemployable due to a service-connected disability. This documentation must be provided on U.S. Department of Veterans Affairs (VA) official letterhead. If you provide this documentation, you are not required to have a physician complete Section 5 of this form or provide any additional documentation related to your disabling condition. You only need to complete Sections 2, 3, and 4.

Section 1: INSTRUCTIONS FOR COMPLETING THIS FORM

- Have a doctor of medicine or osteopathy complete and sign Section 5.
- If you are a veteran who has received a determination from the VA that you are currently unemployable due to a service-connected disability, attach documentation of this determination. You are not required to have a physician complete Section 5. If you do not have documentation showing you are unemployable due to a service-connected disability, you must have a physician complete Section 5.
- Sign and date the application in Section 4. A representative may sign on your behalf if you are unable to do so because of your disability. If a representative is signing on your behalf, a valid power of attorney must accompany your application. If a representative is signing on your behalf and a valid power of attorney is not received along with your application within 90 days of the date of your physician's signature in Section 5, or if you are a veteran, within 90 days of the date of your certification in Section 4, your application will be denied.
- Make sure that Sections 2 thru 4 include all requested information. Incomplete or inaccurate information may cause your application to be delayed or denied.
- Send the completed application with any necessary documentation to HESC, the Servicer of your loan(s), at the address shown below.
- If you are applying for discharge of more than one HESC private loan you will not be required to complete multiple applications. You can list all of the loans you have with HESC in Section 3.
- **Important: HESC must receive your application and all required documentation within 90 days of the date of your physician's signature in Section 5; or if you are a veteran, within 90 days of the date of your certification in Section 4.**

Send the completed Discharge Application and any documentation to HESC at:

Higher Education Servicing Corp.
4381 W Green Oaks Blvd
Suite 200
Arlington, TX 76016-4452

To expedite processing, fax this application and any documentation to (817) 792-7878 or you may upload this information through your online account at www.hescloans.com.

Section 2: BORROWER INFORMATION

Borrower Last Name: _____ First: _____ Middle: _____

Date of Birth: _____

SSN: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Home Phone Number: _____ Email address (optional): _____

Cell Phone Number: _____

Note: By providing your phone number(s) above, whether land line or cell phone, you consent to HESC, its affiliates, our agents, and assignees to contact you at the number by calling, texting, or sending other electronic messages for any reason about your accounts with HESC and its affiliates, including but not limited to, collection and payment purposes. You agree that automated dialing equipment or prerecorded voice messages may be used for any of these purposes.

Section 3: LOANS FOR WHICH YOU ARE REQUESTING DISCHARGE

Loan Program: _____ HESC Loan #: _____

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The HESC Loan # for your loan(s) can be found on the second page of your monthly billing statement. If you have additional loans for which you are requesting discharge, please list them on an additional sheet of paper and attach.

Section 4: BORROWER CERTIFICATION

I request that HESC discharge my private student loan(s). **I authorize** any physician, hospital, or other institution having records about the disability that is the basis for my request for discharge to make information from those records available to HESC. **I understand** that (1) HESC must receive this discharge application within 90 days of the date of my physician's signature in Section 5; or if I am a veteran, HESC must receive the documentation described above under "READ THIS FIRST" on the first page of this application within 90 days of the date of my certification in Section 4; (2) if I am a veteran, the certification by a physician on this form is only for the purpose of establishing my eligibility to receive a discharge of a HESC private student loan(s), and is not for purposes of determining my eligibility for, or the extent of my eligibility for, VA benefits; and (3) if this application is approved and my loan(s) is discharged, I will not be permitted to discharge any further HESC private student loan(s) unless I submit a new application where either (A) a physician certifies that I have a Total and Permanent Disability and did not become Totally and Permanently Disabled until a date after the first disbursement date of the loan(s) that I wish to then discharge; or (B) if I am a veteran, I provide documentation from the U.S. Department of Veterans Affairs indicating that I did not become unemployable due to a service-connected disability until a date after the first disbursement date of the loan(s) that I wish to then discharge. **I certify** that (1) I have a Total and Permanent Disability (as defined in Section 6) and (2) I have read and understood, and I agree to, the information on the discharge process, all the terms and conditions contained herein regarding eligibility for discharge, and the terms, conditions and effects of discharge.

Signature of Borrower or Representative

Date

Printed Name

Address of Borrower's Representative

Representative's Relationship to Borrower

Section 5: PHYSICIAN'S CERTIFICATION

READ THIS FIRST: The borrower identified above in Section 2, is applying for a discharge of a HESC private student loan(s) on the basis that s/he has a Total and Permanent Disability (as defined in Section 6). To qualify for a discharge, the borrower must be unable to engage in any Substantial Gainful Activity (as defined in Section 6) by reason of a medically determinable physical or mental impairment that (1) can be expected to result in death; (2) has lasted for a continuous period of not less than 60 months; or (3) can be expected to last for a continuous period of not less than 60 months. HESC's disability standard may differ from disability standards used by other lenders or federal and state agencies. A determination by a federal agency (for example the Social Security Administration) or a state agency that the borrower is disabled does not establish the borrower's eligibility for this discharge.

Instructions for Physician:

- Complete this form if you are a doctor of medicine or osteopathy legally authorized to practice in the United States.
- All fields must be completed. If a field is not applicable, enter "N/A".
- Your signature and date must include month, day and year (mm-dd-yy).
- Provide all requested information for items 1 and 2 below. Complete the physician's certification (item 3). The borrower's loan discharge application cannot be processed if the information requested in this section is missing or if your signature is missing.
- If you make any changes to the information you provide in this section, you must initial each change.
- Please return the completed form to the borrower or the borrower's representative. HESC may contact you for additional information or documentation.
- If you are licensed to practice in American Samoa, Puerto Rico, the U.S. Virgin Islands, the Northern Mariana Islands, the Marshall Islands, Micronesia, or Palau, attach a copy of your professional license that clearly shows the expiration date.

1. Ability to Engage in Substantial Gainful Activity. Does the individual identified in Section 2 above (the "borrower") have a medically determinable physical or mental impairment that (a) prevents the borrower from engaging in any Substantial Gainful Activity (as defined below), in any field of work, and (b) can be expected to result in death, or has lasted for a continuous period of not less than 60 months, or can be expected to last for a continuous period of not less than 60 months?

YES NO

Substantial Gainful Activity means a level of work performed for pay or profit that involves doing significant physical or mental activities, or a combination of both. If the borrower is able to engage in any Substantial Gainful Activity in any field of work, you must answer "No" and the applicant/borrower does not qualify for this disability discharge.

2. Duration of Disability. Provide the approximate date (mm-dd-yy) on which the borrower became Totally and Permanently Disabled: _____

3. Physician's Certification. I certify the following regarding _____ (borrower's name):

- The information I have provided in this Section 5 is true and complete to the best of my knowledge.
- I understand that a borrower who is unable to engage in any Substantial Gainful Activity in any field of work by reason of medically determinable physical or mental impairment that (1) can be expected to result in death, (2) has lasted for a continuous period of not less than 60 months, or (3) can be expected to last for a continuous period of not less than 60 months is eligible for a Total and Permanent Disability as defined on this form.
- I understand that a borrower who is currently able to engage in any Substantial Gainful Activity in any field of work does not have a Total and Permanent Disability as defined on this form.

I am a doctor of (check one) ___medicine ___osteopathy/osteopathic medicine. I am legally authorized to practice in the state of _____, and my professional license number is _____ (subject to verification through state records).

Physician's Signature (stamp not accepted)

Date (mm-dd-yy)

Printed Name of Physician

Address

City, State, Zip Code

Telephone

Fax

Email Address (optional)

Section 6: DEFINITIONS

- If you have a **“Total and Permanent Disability”** or you are **“Totally and Permanently Disabled”**, this means that:
 1. You are unable to engage in any Substantial Gainful Activity by reason of a medically determinable physical or mental impairment that can be expected to result in death, that has lasted for a continuous period of not less than 60 months, or that can be expected to last for a continuous period of not less than 60 months OR
 2. You are a veteran who has been determined by the VA to be **unemployable due to a service-connected disability**.
- **Substantial Gainful Activity** means a level of work performed for pay or profit that involves doing significant physical or mental activities, or a combination of both.
- A **discharge of a loan** due to Total and Permanent Disability cancels your obligation (and, if applicable, your cosigner’s obligation) to repay the remaining balance on your HESC private student loan(s).
- The **Servicer** of your loan(s) is Higher Education Servicing Corporation (HESC).
- The term **“state”** as used on this application includes the 50 United States, the District of Columbia, American Samoa, the Commonwealth of Puerto Rico, Guam, the U.S. Virgin Islands, the Commonwealth of the Northern Mariana Islands, the Republic of the Marshall Islands, the Federated States of Micronesia, and the Republic of Palau.

Section 7: ELIGIBILITY REQUIREMENTS

If you have **never received a discharge** of any HESC private student loan(s) based on a determination that you are Totally and Permanently Disabled, you are eligible to have your HESC private student loan(s) discharged by completing and submitting this application, including a physician’s certification in Section 5, or, if you are a veteran, alternative information as described herein, confirming that you are Totally and Permanently Disabled.

If you have received a discharge of a prior HESC private student loan(s) based on a determination that you are Totally and Permanently Disabled, any future HESC private student loan(s) may only be discharged (1) if the date on which you became Totally and Permanently Disabled (see Section 5.2) occurred after the first disbursement date(s) of the loan(s) that you are applying to have discharged, and (2) by completing and submitting a discharge application that meets all of the requirements set forth herein, including a physician’s certification in Section 5; or, if you are a veteran, alternative information as described herein, confirming that you are Totally and Permanently Disabled.

Section 8: DISCHARGE PROCESS

Review of your discharge application. HESC will review your completed discharge application and any accompanying documentation to determine your eligibility to have your loan(s) discharged due to Total and Permanent Disability. If applicable, HESC may also contact your physician for additional information. If based on the information provided by your physician, HESC determines that you do not qualify to have your loan(s) discharged; you will remain obligated to repay your HESC private student loan(s). You will be notified of HESC’s decision via mail. To avoid any negative impact on your account or to your credit, you should continue to make scheduled payments on your loan(s) until you have received notification that your application for discharge has been approved.

Discharge. If HESC determines that you qualify to have your loan(s) discharged, you will be notified that a discharge has been granted. The discharge will be reported to national consumer reporting agencies, any pending disbursements for your HESC private student loan(s) will be cancelled, and any loan payments that were received after the date the physician certified your discharge application, or, if you are a veteran, after the date of your certification in Section 4, will be returned to the payer. You may receive a 1099-C, as required by the Internal Revenue Code at the end of the calendar year in which your loan(s) was discharged.

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant’s income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Bureau of Consumer Financial Protection, 1700 G Street NW, Washington, DC 20006.