

# Teacher Loan Forgiveness (TLF) Application Walkthrough



TLFA

## TEACHER LOAN FORGIVENESS APPLICATION

### William D. Ford Federal Direct Loan (Direct Loan) Program

### Federal Family Education Loan (FFEL) Program

OMB No. 1845-0059  
Form Approved  
Exp. Date 09/30/2023

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

### SECTION 1: BORROWER IDENTIFICATION

If you download the form online, you need to fill out everything as you see in this example.

If you log in to your account and download the pre-filled form, be sure to write in your SSN and phone numbers.

Please enter or correct the following information.

**Check this box if any of your information has changed.**

SSN	000-00-0000
Name	John Q. Borrower
Address	123 Teacher Lane
City	Anytown State SS Zip Code 00000
Telephone - Primary	000-000-0000
Telephone - Alternate	000-000-0000
Email (Optional)	

### SECTION 2: LOAN FORGIVENESS REQUEST (TO BE COMPLETED BY THE BORROWER)

**READ SECTIONS 7 - 10 BEFORE COMPLETING THE APPLICATION. The information you provide may be subject to verification.**

I request forgiveness on my Direct Loan and/or FFEL program loans based on my employment as a full-time teacher for at least five consecutive, complete academic years. During that five-year period, I taught (check all that apply):

- at an eligible **elementary school**    at an eligible **secondary school**    for an eligible **educational service agency**

**AND** I was (check all that apply): Be sure both selections are either "elementary" or "secondary."

- A highly qualified full-time special education teacher for elementary school children with disabilities (*forgiveness of up to \$17,500*).
- A highly qualified full-time special education teacher for secondary school children with disabilities (*forgiveness of up to \$17,500*).
- A highly qualified full-time mathematics teacher for secondary school students (*forgiveness of up to \$17,500*).
- A highly qualified full-time science teacher for secondary school students (*forgiveness of up to \$17,500*).
- A highly qualified full-time secondary education teacher, or (only if my teaching service began before 10/30/2004) a full-time secondary education teacher in a subject area relevant to my academic major (*forgiveness of up to \$5,000*).
- A highly qualified full-time elementary education teacher, or (only if my teaching service began before 10/30/2004) a full-time elementary education teacher and I demonstrated knowledge and teaching skills in reading, writing, mathematics, and other areas of the elementary school curriculum (*forgiveness of up to \$5,000*).

It's okay to select more than one box if applicable, BUT - only select options with the same amount (\$17,500 or \$5,000) listed. You can only apply for 1 amount.



If you log in to your account and download the pre-filled form, be sure to write in your SSN here - even if your account number is also printed.

Borrower Name John Q. Borrower

Borrower SSN 000-00-000

SECTION 3: PREVIOUS LOAN FORGIVENESS INFORMATION (TO BE COMPLETED BY THE BORROWER)

Have you previously applied for or received loan forgiveness from a loan holder or servicer other than the loan holder/ servicer to which you are submitting this application for Teacher Loan Forgiveness?

[X] No - Skip to Section 4 - If you check "No," leave all lines and boxes above blank. Check "No" if you were previously denied.

[ ] Yes - Check the appropriate box below and provide the requested information.

[ ] I applied for loan forgiveness with the loan holder/servicer listed below, but have not yet received forgiveness. Provide the loan holder/servicer information requested below; leave "Forgiveness Amount" blank.

[ ] I applied for and received loan forgiveness with the loan holder/servicer listed below. Provide the loan holder/servicer and forgiveness amount information requested below.

Loan Holder Name \_\_\_\_\_

Telephone or Web Site \_\_\_\_\_

Forgiveness Amount \$ \_\_\_\_\_

If you've previously applied for loan forgiveness, check "Yes," select the situation that best describes yours, and provide the requested information.

SECTION 4: UNDERSTANDINGS, CERTIFICATIONS, AND AUTHORIZATION (TO BE COMPLETED BY THE BORROWER)

I understand that: (1) my loan holder will apply a forbearance of principal and interest on my qualifying loans from the date my loan holder receives my completed loan forgiveness application through the date my loan forgiveness request is approved or denied, unless I notify my loan holder that I want to continue making regular payments during this period; (2) if I continue making regular payments while my application is being reviewed, this may reduce the amount of my loan forgiveness; (3) if I am past due on payments when this application is processed, my loan holder may grant a separate forbearance to resolve the delinquency; and (4) any unpaid interest that accrues during each of these forbearance periods may be capitalized.

I certify that: (1) the information I provided in Sections 1-3 is true and correct; and (2) I have read and understand the definitions and terms and conditions in Sections 8-10, and I meet the eligibility requirements for loan forgiveness.

I authorize the entity to which I submit this request and its agents to contact me by cellular telephone number that I provide now or in the future using automated prerecorded voice or text messages.

Select from the calendar dropdown or input a date as mm-dd-yyyy.

Borrower's Signature Print this form and sign your name here. Date 10-18-2023

SECTION 5: CHIEF ADMINISTRATIVE OFFICER'S (CAO'S) CERTIFICATION (TO BE COMPLETED BY THE CAO)

Carefully read Sections 7-10. Return the completed form to the applicant identified in Section 1.

I certify, to the best of my knowledge and belief, that: (1) the applicant has met the requirements for loan forgiveness as specified in Sections 8-10, and (2) during the period for which the applicant is seeking forgiveness, the applicant was a teacher as defined in Sections 8 and 9 and taught full time for one or more consecutive, consecutive, or more eligible Title I schools or educational service agencies (ESAs) in the capacity that the applicant was employed from (mm-dd-yyyy) 8-15-2020 to 5-25-2022

The end date must be:
• In the past
• Prior to CAO signing
• In mm-dd-yyyy format

School (not school district) or ESA Name Your school here as it is in the TCLI directory

[ ] Check here if this is a school operated by the Bureau of Indian Education (BIE) or operated on an Indian reservation by an Indian tribal group under contract with the BIE.

View the TCLI directory on StudentAid.gov

School or ESA Address (Street, City, State, Zip Code) 123 Learning Way, Anytown SS 00000

School or ESA Website myschoolwebsite.us

School District Your school district here County Listed as "location" in the TCLI directory

CAO's Name and Title (Printed) Name and title (principle, HR director, etc.) of person signing

CAO's Signature Have the CAO sign their name here. Date 10-01-2023

Telephone \_\_\_\_\_ Email (Optional) \_\_\_\_\_

Signature date must be:
• After service end date
• In mm-dd-yyyy format

Everything in this section is required except email.