

Teacher Loan Forgiveness (TLF) Application Walkthrough



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: 12/31/2026

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

Please enter or correct the following information.

Check this box if any of your information has changed.

Social Security Number (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):

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.

Section 2: Loan Forgiveness Request (To Be Completed By The Borrower) READ SECTIONS 6 - 11 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

Be sure this selection and the next (forgiveness amount on the next page) are either "elementary" or "secondary". **MOHELA**[®] TLF Application Walkthrough, Continued

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

| Borrower's Name: John Q. Borrower | Borrower's SSN: 000-00-0000 |
|---|---|
| AND I was (check all that apply): | |
| A highly qualified full-time special education disabilities (forgiveness of up to \$17,500). | teacher for elementary school children with |
| A highly qualified full-time special education (forgiveness of up to \$17,500). | teacher for secondary school children with disabilities |
| A highly qualified full-time mathematics teac to \$17,500). | her for secondary school students (forgiveness of up |
| A highly qualified full-time science teacher for \$17,500). | or secondary school students (forgiveness of up to |
| A highly qualified full-time secondary educat before 10/30/2004) a full-time secondary educat academic major (forgiveness of up to \$5,000 | ion teacher, or (only if my teaching service began ucation teacher in a subject area relevant to my)). |
| A highly qualified full-time elementary educate before 10/30/2004) a full-time elementary educate teaching skills in reading, writing, mathematic curriculum (forgiveness of up to \$5,000). | tion teacher, or (only if my teaching service began ucation teacher and I demonstrated knowledge and cs, and other areas of the elementary school |
| Section 3: Previous Loan Forgiveness Borrower) | Information (To Be Completed By The |
| Have you previously applied for or received loar the loan holder/servicer to which you are submit | forgiveness from a loan holder or servicer other than ting this application for Teacher Loan Forgiveness? |
| x No - Skip to Section 4. If you check "No" "No" if you were | , leave all lines and boxes below blank. Check previously denied. |
| Yes - Check the appropriate box below and | provide the requested information. |
| I applied for loan forgiveness with the loar received forgiveness. Provide the loan h "Forgiveness Amount" blank. | In holder/servicer listed below, but have not yet older/servicer information requested below; leave |
| I applied for and received loan forgivene the loan holder/servicer and forgiveness | ss with the loan holder/servicer listed below. Provide amount information requested below. |
| Loan Holder Name | |
| Telephone or Website | |
| Forgiveness Amount \$ | |
| If you previously applied for loan forgiveness, check "Yes", and sele the situation that best describes yo and provide the requested informa | ect burs, tion. |

CONCILEA TLF Application Walkthrough, Continued

If you log in to your account and download the pre-filled form, be sure to write your SSN here (on pages 2-4) – even if your account number is also printed.

Borrower's Name: John Q. Borrower

Borrower's SSN: 000-00-0000

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) unpaid interest that accrues during each of these forbearance periods will not be capitalized on a Direct Loan Program loan, but it may be capitalized on a FFEL Program loan.

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 9-11, 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 regarding my request or my loans at any cellular telephone number that I provide now or in the future using automated telephone dialing equipment or artificial or prerecorded voice or text messages.

Borrower's Signature: Print this form and sign your name here. Date (mm/dd/yyyy): 07/24/2025

CONCLEA TLF Application Walkthrough, Continued

Borrower's Name: John Q. Borrower

Borrower's SSN: 000-00-0000

Section 5: Chief Administrative Officer's (CAO's) Certification (To Be Completed By The CAO)

Carefully read Sections 6-11. 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 9-11, and (2) during the period for which the applicant is seeking forgiveness, the applicant was a teacher as defined in Sections 9 time for one or more consecutive, complete academic years at one or more or educational service agencies (ESAs) in the capacity that the applicant into from (mm/dd/yyyy) 01/01/2020 to 01/01/2024 Prior to CAO signing In mm/dd/yyyy format

School (not school district) or ESA Name Your school here as it is in 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.

School or ESA Address (Street, City, State, Zip Code)

View the TCLI directory on StudentAid.gov

| Street 123 Learning Way | | | |
|---|----------------------------|---|--|
| City_Anytown | State SS | Zip Code 00000 | |
| School or ESA Website myschoolwebsite.us | | | |
| School District Your school district here | | | |
| County Listed as "location" in TCLI directory | | | |
| CAO's Name and Title (Printed) Name and title | e (principle, HR director, | etc.) of person signing | |
| CAO's Signature Have the CAO sign their na | me here. | | |
| Date (mm/dd/yyyy) 07/24/2025 | | Signature date must be: | |
| Telephone (000)-000-0000 | | Alter service end date In mm/dd/yyyy format | |
| Email (Optional) | | | |
| | | | |

Everything in this section is required except email.