

# LOAN INFORMATION DISCLOSURE

**DIRECTIONS**—If you are receiving a Federal Perkins, University Trust Fund, Health Professions or Nursing Student Loan, **you must complete and return this loan disclosure to the Financial Aid Office** for your campus in order to continue processing your Financial Aid. A hold will be placed on your record if this form is not returned and your loan will not be disbursed. If you have any questions, please call the Financial Aid Office on your campus.

To ensure privacy online, open in Adobe Reader (free at Adobe.com). Please add the required signature(s) in blue or black ink.

## PART A. Reference information

This information is necessary to assist the University of Minnesota in performing its duty to recover outstanding loan debts. You are obligated by law to complete this section. Failure to do so may delay or prevent processing of your loan. If you should, at any time, default on your loan payments, the University will submit this information to its collection agency. All references must include a complete name, address, and phone number; include a cell phone number and email address, if available. List three different references with different, current United States addresses.

Reference #1	Current mailing address (street, apartment or P.O. box number, city, state, ZIP code)	
Email address	Phone (include area code)	Cell phone (include area code)
Employer	Employer's phone number	
Reference #2	Current mailing address (street, apartment or P.O. box number, city, state, ZIP code)	
Email address	Phone (include area code)	Cell phone (include area code)
Employer	Employer's phone number	
Reference #3	Current mailing address (street, apartment or P.O. box number, city, state, ZIP code)	
Email address	Phone (include area code)	Cell phone (include area code)
Employer	Employer's phone number	

## PART B. Student authorization

**IMPORTANT! You are required to complete an exit interview upon graduation, transfer, or dropping below half-time status. For more information, visit <http://z.umn.edu/exits>.**

I authorize the University to place a hold on my records if: (a) I fail to notify the University of Minnesota of any change in my address, name, or student status, (that is failure to notify the University of all periods of non-registration in day school, except for summer sessions, even though I may plan to register later), or (b) I fail to comply with the terms of the promissory note.

I understand it is my responsibility to complete an exit interview with the University to arrange my student loan repayment schedule, if at any time I graduate, transfer to another college or university, or drop below half-time status.

I understand the rights and responsibilities associated with these funds.

I understand that by providing the cell phone numbers above and by signing this form, I am giving the University and its billing servicers permission to use these cell phone numbers to contact me and my loan references regarding my loans.

I understand that the Federal government may take the following actions in an effort to collect these loans: report to national credit bureaus, obtain information from the IRS, recapture of tax returns, garnishment and wage assignment, and/or attachment of Social Security payments.

Student name (last, first, middle)		Last 4 digits of SSN	University ID
Birth date (mm/dd/yyyy)	Driver's license number and state of issue	College (e.g., CLA, IT)	Anticipated graduation date
Current mailing address (street, apartment or PO Box number, city, state, ZIP code)			Cell phone
Permanent address (street, apartment or PO Box number, city, state, ZIP code)			Permanent phone
Signature		Email address	Date signed



To request copies of this form in an alternative format, please call the Disability Resource Center liaison at 612-625-9578. The University of Minnesota is an equal opportunity employer and educator. This form is printed on paper made from no less than 20 percent post-consumer waste.

