Direct Loans William D. Ford Federal Direct Loan Program	REPAYMENT PLAN SELECTION	OMB No. 1845-0014 Form Approved		
	William D. Ford Federal Direct Loan Program	DRAFT 07-02-2007		
	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				
previous repayment plan. Plea	carefully to understand your repayment options and then complete this form to select a repayme se print clearly using blue or black ink.			
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If you need help completing this form, contact the Direct Loan Servicing Center through one of the options provided in Section 5 on the back of this form. Return the completed form to the address shown in Section 5.

If you are selecting any repayment plan except for the Income Contingent Repayment Plan with the joint repayment option, you may do so electronically at the Direct Loan Servicing Center's website: www.dl.ed.gov

Section 1: Borrower Inform					
Borrower's Last Name	ame Borrower's First Name Borrower's Middle Initial Borrower's Social Security				er:
				- -	
					11
Section 2: Repayment Plan	Selection - to be co	ompleted by ALL I	BORROWERS		
				t you owe. The enclosed information	
				less you have both Direct PLUS Loa	
				Loans, Direct Consolidation Loans), ns under the Income Contingent Rep	
				may not repay Direct PLUS Loans	
Plan.					
Loan Types	Standard	Graduated	Extended		Income
Direct Subsidized Loans					Contingent
Direct Unsubsidized Loans			Fixed Payments	Graduated Payments	
Direct Consolidation Loans	– – – – – – – – – – – – – – – – – – –			2	
Direct PLUS Loans			Fixed Payments	Graduated Payments	Not Available
	_	—			
Section 3: Spouse Informat					
a repayment plan for a Dire	•	• • •		u are separated from your spouse), or (2) selecting
				Spouso's Social Socurity Number	
Spouse's Last Name	Spouse's First Na	ame Sp	ouse'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 an ICR Plan Consent to Disclosure of Tax Information form. You may also be required to complete an ICR Plan Alternative Documentation of Income form. We have enclosed the required ICR Plan form(s). Please complete and return the enclosed form(s) along with this Repayment Plan Selection form. If you do not submit the required ICR form(s), 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. You are responsible for paying this initial amount until we have the information needed to calculate your actual ICR payment and notify you of that amount. 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 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 the Direct Loan Servicing Center 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 the Direct Loan Servicing Center in writing at the mailing address or the web site address shown in Section 5.

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. 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 Return this form to:

U.S. Department of Education Direct Loan Servicing Center P.O. Box 5609 Greenville, TX 75403-5609

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

- Call us at 1-800-848-0979 or, if you use a telecommunications device for the deaf (TDD), at 1-800-848-0983.
- E-mail us by going to www.dl.ed.gov and clicking on Contact Us.
- Write to us at the mailing address provided above.

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) and 428B(f) of the HEA (20 U.S.C. 1091(a)(4) and1078-2(f)) 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 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 or state 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, or local agencies, or force to efforts, disclosures may be made to guaranty agencies or to financial and educational institutions. To counsel you in repayment efforts, d

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 0.33 hours (20 minutes) per response, including the time to review instructions, search existing data sources, gather and maintain the data needed, and complete and review the information. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving the form, please write to:

U.S. Department of Education Washington, DC 20202-4700.

If you have questions regarding the status of your individual submission of this form, contact the Direct Loan Servicing Center (see Section 5 of this form).