

## Federal Student Loan Debt Relief: Parent Income Form

OMB No. 1845-XXXX

### Why Are We Asking for This Information?

The U.S. Department of Education will provide eligible borrowers with full or partial discharge of loans up to \$20,000 to Federal Pell Grant recipients and up to \$10,000 to non-Pell Grant recipients.

If a borrower requests debt relief and was enrolled in school as a “dependent student” for financial aid purposes between July 1, 2021 and June 30, 2022, their eligibility is based on their parents’ income.

*Dependency status for financial aid purposes is determined based on the information provided in the student’s Free Application for Federal Student Aid (FAFSA®) form.*

### Who Should Fill Out This Form?

A parent should ONLY submit this form if:

- your child submitted a Federal Student Loan Debt Relief Application, AND
- the U.S. Department of Education asked your child to have you submit this form.

*A “parent” is the legal parent of the student borrower. This might be a biological parent, an adoptive parent, or a person whom the state has determined to be a parent.*

If the student borrower has two parents, only one needs to complete this form. Either parent may complete this form—when possible, it should be the parent associated with the student’s FAFSA form.

### Does My Child Qualify?

**Dependent student borrowers who were enrolled** between July 1, 2021 and June 30, 2022 and who have eligible loans qualify for debt relief if their parent(s) made

- less than \$125,000 in 2020 or 2021 (individual), or
- less than \$250,000 in 2020 or 2021 (family).

If you filed federal taxes, your income requirements are based on your adjusted gross income (AGI), which tends to be lower than your total income. Your AGI can be found on line 11 of the IRS Form 1040.

### How It Works

Submit today (but no later than Dec. 31, 2023) so we can continue to process your child’s application and confirm their eligibility for debt relief.

## Parent Information

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**First Name**

**Middle Initial** - *optional*

**Last Name**

**Former Last Name** - *optional*

*Enter any other last name you may have provided to the U.S. Department of Education.*

**Social Security Number (SSN)**

*If you don't have an SSN, enter 000-00-0000.*

**Confirm Social Security Number (SSN)**

**Phone Number**

**Email**

**Confirm Email**

## Dependent Student Information

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**First Name**

**Middle Initial** - *optional*

**Last Name**

**Former Last Name** - *optional*

*Enter any other last name your child may have provided to the U.S. Department of Education.*

**Social Security Number (SSN)**

**Confirm Social Security Number (SSN)**

**Date of Birth**

**Phone Number**

## Parent: Review and Submit the Agreement

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By signing this form, you agree with the following statements:

1. To determine my dependent child's eligibility for up to \$20,000 in federal student loan relief, I affirm that one of the following is true for 2020 (Jan. 1–Dec. 31, 2020) or 2021 (Jan. 1–Dec. 31, 2021):
  - I made less than the required income to file federal taxes.
  - I filed as a single tax-filer AND made less than \$125,000.
  - I was married, filed my taxes separately, AND made less than \$125,000.
  - I was married, filed my taxes jointly, AND made less than \$250,000.
  - I filed as a head of household AND made less than \$250,000.
  - I filed as a qualifying widow(er) AND made less than \$250,000.

*If you filed federal taxes, your income requirements are based on your adjusted gross income (AGI), which tends to be lower than your total income. Your AGI can be found on line 11 of the IRS Form 1040.*

2. If requested, I agree to provide proof of income to the U.S. Department of Education. I understand that if I fail to do so by March 31, 2024, or if I do not meet the income requirements to qualify my child for federal student loan debt relief, my child's application for relief will not be processed.
3. I verify that I am the individual named in the parent information section above.

**Yes, I certify under penalty of perjury under the laws of the United States of America that all of the information provided on this form is true and correct.** I understand that any falsification 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, including, but not limited to, 18 U.S.C. § 1001, 18 U.S.C. § 1621, and 20 U.S.C. § 1097.

No, I do not meet the requirements stated above.

IF "NO" IS SELECTED: You may submit this form, but your dependent student likely won't be eligible for debt relief.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### WHERE TO SEND THE COMPLETED FORM

Return the completed form and any documentation to:

Mail to: Federal Student Aid Information Center

PO Box 1854

Monticello, KY 42633

Fax to: (606) 396-4821

## Privacy Act Statement

The Privacy Act of 1974, as amended (5 U.S.C. 552a), requires that the following notice be provided to you:

The authorities for collecting the requested information from and about you via this form are title IV of the Higher Education Act of 1965, as amended (HEA) (20 U.S.C. 1070 *et seq.*); 20 U.S.C. 1018(f) and 1087e(h); the Higher Education Relief Opportunities for Students Act of 2003 (20 U.S.C. 1098bb) (including any waivers or modifications that the Secretary of Education deems necessary to make to any statutory or regulatory provision applicable to the federal student financial assistance programs under title IV of the HEA to achieve specific purposes listed in the section in connection with a war, other military operation, or a national emergency); the Presidential Memorandum entitled, “A Student Aid Bill of Rights to Help Ensure Affordable Loan Repayment” (March 10, 2015); and 31 U.S.C. 7701 and Executive Order 9397, as amended by Executive Order 13478 (November 18, 2008).

Participating in the Federal Student Loan Relief is voluntary, but you must provide your SSN and enough of the other requested information on this form so that the U.S. Department of Education (Department) can verify your identity in order 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 loan relief, and to permit the servicing of your loans. Failure to provide any of the requested information may result in your application for Federal Student Loan Relief not being processed.

The requested information on this form also may be disclosed without your consent, on a case-by-case basis or under a matching program, to third parties as authorized under routine uses set forth in the system of records notices entitled, “Common Services for Borrowers (CSB)” (18-11-16) and “Enterprise Data Management and Analytics Platform Services (EDMAPS)” (18-11-22). All published systems of records notices are available under the “Department System of Records Notice”/“Federal Student Aid (FSA)” subsection of the U.S. Department of Education’s “Privacy Act System of Record Notice Issuances (SORN)” webpage located at <https://www2.ed.gov/notices/ed-pia.html>. A summary of some of the routine uses in these system of records notices are set forth below.

To assist with the determination of eligibility for loan discharges, the Department may disclose records to holders of loans made under title IV of the HEA. To verify the identity of the individual whom records indicate has applied for or received title IV, HEA program funds, disclosures may be made to guaranty agencies, educational and financial institutions, and their authorized representatives; to Federal, State, Tribal, or local agencies, and their authorized representatives; to private parties, such as relatives, business and personal associates, and present and former employers; to creditors; to consumer reporting agencies; to adjudicative bodies; and to the individual whom the records identify as the party obligated to repay the title IV, HEA obligation;

To determine program eligibility and benefits, disclosures may be made to guaranty agencies, educational and financial institutions, and their authorized representatives; to Federal, State, or local agencies, and their authorized representatives; to private parties, such as relatives, business and personal associates, and present and former employers; to creditors; to consumer reporting agencies; and to adjudicative bodies.

In the event of judicial or administrative litigation or Alternative Dispute Resolution (ADR), we may send the requested information on this form to the Department of Justice, an adjudicative body, counsel, representative, party, or witness if the disclosure is relevant and necessary to the judicial or administrative litigation or ADR. If the requested information on this form indicates, either alone or in connection with

other information, a violation or potential violation of any applicable statutory, regulatory, or legally binding requirement, we may send it to an entity charged with the responsibility for investigating or enforcing those violations or potential violations. We may send the requested information on this form to a Member of Congress or the Member's staff when necessary to respond to an inquiry from the Member that was made at your written request and on your behalf. Disclosure of the requested information on this form may be made to our contractors for the purpose of performing any function that requires disclosure including for the purpose of Federal Student Loan Relief. As part of any contract with any such contractor, we shall require the contractor to agree to establish and maintain safeguards to protect the security and confidentiality of the disclosed information. Disclosures may also be made to certain researchers under certain circumstances including the researchers agreeing to establish and maintain safeguards to protect the security and confidentiality of the disclosed information.

Further, if the requested information on this form is shared with other principal offices of the U.S. Department of Education that have a need for it in the performance of their job duties, such as the Office of Inspector General, then it may be shared with third parties as authorized under routine uses set forth in such office's system of records notices, such as the "Investigative Files of the Inspector General" (18-10-01).

### **Paperwork Burden Statement**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1845-XXXX. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. If you have comments or concerns regarding the status of your individual submission of this form, please contact Federal Student Aid Information Center, P.O. Box 84, Washington, D.C. 20044 directly. Note: Please do not return the completed form to this address.