



PSLF

# Public Service Loan Forgiveness (PSLF) & Temporary Expanded PSLF (TEPSLF) Certification & Application

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

OMB No. 1845-0110  
Form [Under Review](#)  
Exp. Date: 12/31/2026

Deleted: Approved

**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 Information

Social Security Number (SSN): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone – Primary: \_\_\_\_\_

Email: \_\_\_\_\_

For more information on PSLF, visit [StudentAid.gov/publicservice](https://studentaid.gov/publicservice). To apply online, visit [StudentAid.gov/PSLF](https://studentaid.gov/PSLF).

### Section 2: Borrower Request, Understandings, and Certification

I request (1) that the U.S. Department of Education (the Department) consider this form an application for loan forgiveness to determine whether I qualify for PSLF or TEPSLF, and discharge any qualifying loans that I have, and (2) if none of my loans qualify for PSLF or TEPSLF forgiveness when I submit this form, determine how many qualifying payments I have made toward PSLF and TEPSLF.

I believe I qualify for forgiveness now and request a forbearance while my application is being processed. I understand this period of forbearance will not count toward forgiveness if the Department determines I am not yet eligible for forgiveness.

Deleted: ,

Borrower Name: \_\_\_\_\_ Borrower SSN: \_\_\_\_\_

**I understand that:**

1. To qualify for forgiveness, I must have made 120 qualifying payments on my Direct Loans while employed full-time by a qualifying employer. Neither the 120 qualifying payments nor the qualifying employment have to be consecutive.
2. To qualify for forgiveness, I must be employed full-time by a qualifying employer when I apply for forgiveness.
3. If the Department determines that I appear to be eligible for forgiveness, the Department may contact my employer before granting forgiveness to ensure that I was employed by the employer at the time I applied for forgiveness.
4. If I am eligible for forgiveness, the amount forgiven will be the principal and interest that was due on my eligible Direct Loans when I made my final qualifying payment. Any amount that I pay on those loans after I have made my final qualifying payment will be treated as an overpayment. I must continue to make payments on any of my other loans.
5. If I am not yet eligible for forgiveness, I will be notified of the determination, why it was made, and how many qualifying payments I have made toward PSLF and TEPSLF. If I requested my loans be placed in forbearance while this determination was being made, they will be placed back into repayment.

**I certify** that all the information I have provided on this form and in any accompanying document is true, complete, and correct to the best of my knowledge and belief.

Borrower's Signature: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_\_

Pages 1 and 2 of this form must be completed in their entirety.

**Section 3: [Reminders](#)**

- We highly recommend that you complete this form online by going to [StudentAid.gov/pslf](https://studentaid.gov/pslf). Doing so allows you to search for your employer using the PSLF Employer Database to prepopulate this form, provide your own electronic signature, request that your employer sign electronically, and, once your employer signs electronically, submit this form directly to the Department on your behalf.
- You should complete this form annually or any time you change employers or have a change in your employment status.
- Review the instructions in Section 6 before you complete the remainder of this form.

Deleted: Before You Begin

Borrower Name: \_\_\_\_\_ Borrower SSN: \_\_\_\_\_

**Section 4: Employer Information (to be completed by the borrower or employer)**

1. Federal Employer Identification Number (FEIN/EIN): \_\_\_\_\_
  2. Employer Name: \_\_\_\_\_
  3. Employer Address:  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Employer Website (if any): \_\_\_\_\_
  4. Employment Period:  
Employment or Certification Begin Date (mm/dd/yyyy): \_\_\_\_\_  
Employment or Certification End Date (mm/dd/yyyy): \_\_\_\_\_ OR  Still Employed
  5. Employment Status:  Full-Time  Part-Time
  6. Average hours per week: \_\_\_\_\_ (round up to nearest whole number)
- Check this box if your employer cannot be contacted because the organization has closed or is unable to certify your employment, and skip to Section 5B.

**Section 5A: Employer Certification (MUST be completed by the employer)**

Terms in **Bold** are defined in Section 7.

By providing an **acceptable signature** below, I certify [and declare under penalty of perjury](#) that (1) the information in Section 4 is true, complete, and correct to the best of my knowledge and belief (see Section 6 for instructions), (2) I am an **authorized official** of the organization named in Section 4, and (3) the borrower named in Section 1 is or was a **direct employee** of the organization named in Section 4; or is or was employed under a contract in a position or providing services that, under applicable state law, cannot be filled or provided by a direct employee of the organization named in Section 4.

[Additionally, I certify and declare under penalty of perjury that the organization named in Section 4 does not engage in activities such that it has a \*\*substantial illegal purpose\*\* as defined under 34 CFR 685.219.](#)

[I declare under penalty of perjury \(pursuant to 28 U.S.C. § 1746\) that the foregoing is true and correct.](#)

If any of the information is crossed out or altered in Section 4 or 5A, the authorized official must initial those changes.

Deleted: to

Formatted: Indent: Left: 0.5"

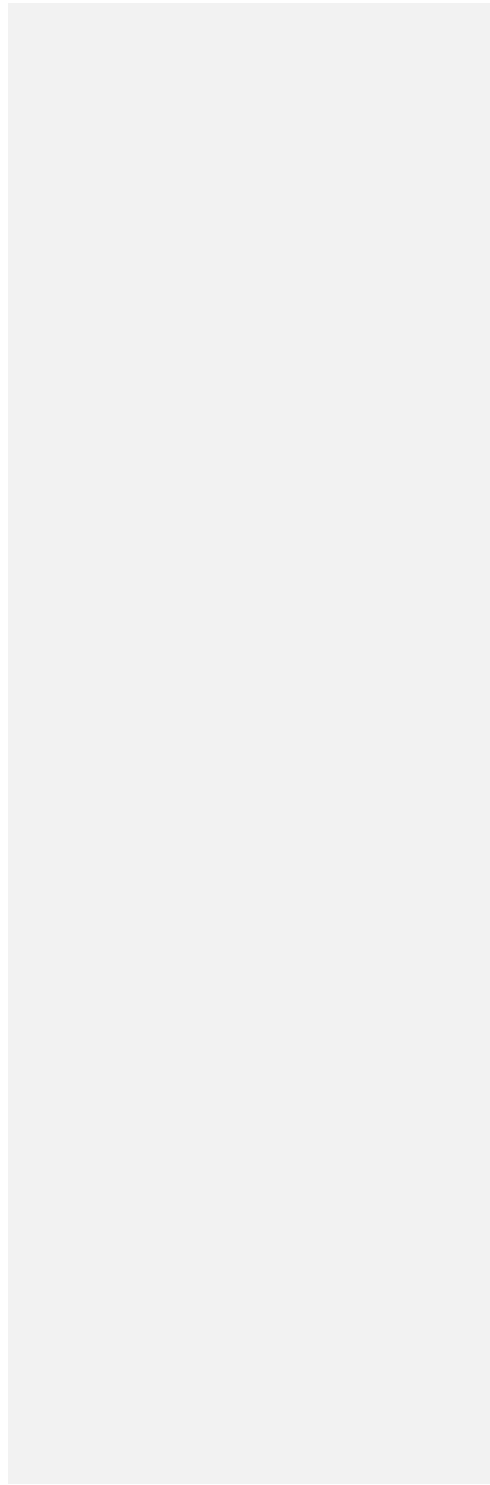
Formatted: Font: Bold

Official's Name: \_\_\_\_\_ Official's Phone: \_\_\_\_\_

Official's Title: \_\_\_\_\_

Official's Email: \_\_\_\_\_

**Authorized Official's Signature:** \_\_\_\_\_ **Date (mm/dd/yyyy):** \_\_\_\_\_



Please omit pages 4–16 when mailing or faxing back.

### Section 5B: Alternative Documentation For Employment Certification (*only if Section 5A cannot be completed*)

If you cannot obtain certification from your employer because the organization is closed or because the organization is unable to certify your employment and indicated that by checking the box above on this form, you can submit alternative documentation that may allow your employment to be certified. See Section 6 for more information. If this form is submitted without the necessary supporting documents, we will contact you to request additional information before your employment can be certified.

### Section 6: Instructions for Completing This Form

When completing this form, type or print using dark ink. Enter dates as month/day/year (mm/dd/yyyy). Use only numbers. Example: March 14, ~~2027~~ = 03/14/2027. If you need to correct any answer on this form, cross through the original answer, provide the correct answer, AND initial the change. If this form is completed using the PSLF Help Tool at [StudentAid.gov/pslf](https://StudentAid.gov/pslf), you can request that your employer sign it electronically and submit it directly to the Department. If this form is being completed manually or was generated to sign manually, it must be signed using an **acceptable signature and submitted to us**. Terms in **BOLD** are defined in Section 7.

#### Notes for completing Section 4:

Question 1: **The Federal Employer Identification Number (FEIN/EIN)** is a 9-digit number that can generally be found in box b of your IRS Form W-2 (W-2). However, if your employer uses a **Professional Employer Organization (PEO)** or you are employed under a contract in a position or providing services that, under applicable state law, cannot be filled or provided by a **direct employee** of the qualifying employer, you will need to obtain the **FEIN/EIN** of the qualifying employer directly, because the **FEIN/EIN** on your W-2 or 1099 may be that of a different organization. An FEIN/EIN that is found using an internet search or on an IRS Form other than a W-2 (for example an IRS Form 1099), may not be the **FEIN/EIN** that an employer uses for payroll purposes and will not be included in the **PSLF Employer Database**.

Question 2: If this form was generated by the **Help Tool**, the employer name selected from the **PSLF Employer Database** or name you manually entered will be pre-populated. If this form is being completed manually, enter the name of your employer as it appears on your W-2 (unless your employer uses a PEO, in which case provide your non-PEO employer's name).

Question 3: If this form is being completed manually, enter the address of your employer. If your form was generated by the Help Tool, that information will be prepopulated on this form.

Deleted: 2023

Deleted: 2023

Question 4: *Employment or Certification Begin Date* Enter the date that you began your employment with the employer whose **FEIN/EIN** appears in Question 1:

- If this is the first time you are submitting this employer for certification, or
- If you have continued to be employed in the same **employment status** (Question 5) since you began employment with this employer.

Enter the begin date that you would like to be evaluated with the employer whose **FEIN/EIN** appears in Question 1:

- If your **employment status** has changed since you last had your employment certified with this employer, or
- If you have had a break in employment since you last had your employment certified with this employer.

Enter the date that you:

- Ended employment with the employer whose FEIN/EIN appears in Question 1, or
- Ceased to be in the **employment status** reported in Question 5.

Check the box labeled "Still Employed", if you are still employed with the employer whose **FEIN/EIN** appears in Question 1 at the time you are completing this form.

Question 5: Check the **Full-Time** box if you worked an average of 30 hours or more per week for the period of time being certified in Question 4 or otherwise meet the definition of Full-Time provided in Section 7. If you worked an average of less than 30 hours per week, check the Part-Time box.

Question 6: Provide the average number of hours you worked per week during the period being certified rounded up to the nearest whole number. This should include vacation, leave time, or any leave taken under the Family Medical Leave Act of 1993, but should not include time spent performing volunteer services.

**Notes for completing Section 5A:**

The **Authorized Official** must review the information provided in Section 4 for accuracy. As part of this review, they should ensure that the **FEIN/EIN** provided in Question 1 belongs to their organization OR is the **FEIN/EIN** that is used for payroll purposes, that the employee named in Section 1 is or was a **direct employee** of their organization for the period being certified, OR is or was employed under a contract in a position or providing services for their organization that, under applicable state law, cannot be filled or provided by a **direct employee** of their organization. If the **Authorized Official** needs to correct any answer in Section 4, they must cross through the original answer, provide the correct answer, AND initial the changes.

### Notes for completing Section 5B:

If you are unable to have this form completed by an **Authorized Official** because the organization has closed or you are unable to contact your employer to obtain an **acceptable signature**, you may be able to certify your employment using alternative documentation. This process will add significant time to the review of this form. If the employment being certified is or was with the U.S. Military, you can submit this form with a Form DD-214 or an SCRA Status Report document that corresponds with the employment period in Question 4, instead of completing Section 5A. If the employment being certified is for any other employer, you must submit documentation that confirms both the **FEIN/EIN** of the employer AND your period of employment, instead of completing Section 5A. This would include an IRS Form W-2 for every calendar year included in your employment period (with or without corresponding **paystubs**), OR **paystubs** for every month that you were employed during the employment period. Any month that cannot be documented will not be certified as eligible employment.

**Deleted:** The Authorized Official must provide a response to the statement that the employer does not engage in activities such that it has a **substantial illegal purpose** for this form to be processed (as defined below in Section 7 of this form).  
-----Section Break (Next Page)-----

---

## Section 7: Definitions

### Definitions Specific to this Form

The **PSLF Employer Database** is a searchable database maintained by the Department that borrowers search by entering their employer's FEIN/EIN when using the Help Tool to generate this form. Forms generated this way will be prepopulated with data from this database when the form is generated by using the Help Tool. Many employers are already included in the database and more are added every day. The database can be searched without logging in by going to [StudentAid.gov/pslf/employer-search](https://StudentAid.gov/pslf/employer-search). The database will display if the employer is eligible, ineligible, or undetermined during the period of employment entered by the borrower.

The PSLF **Help Tool** can be accessed at [StudentAid.gov/pslf](https://StudentAid.gov/pslf). This Help Tool permits a borrower the ability to search the **PSLF Employer Database** to generate this form for eligible employers in the database. The Help Tool also allows a borrower to request the **Authorized Official** to sign this form electronically. By signing electronically, this form can be submitted for review without the need to print it out or obtaining an **acceptable signature**.

The **Federal Employer Identification Number (FEIN/EIN)** is a number issued by the IRS to an employer and is generally provided to the employee in box b of the employee's IRS Form W-2. This should not be confused with a similar State ID number that is found in box 15 of the W-2.

A **Professional Employer Organization (PEO)** is an organization that provides administrative services, such as payroll and benefits, for another organization under a contractual agreement. PEOs are co-employers of an employee, but for PSLF purposes, the employee is considered a direct employee of the non-PEO employer. A borrower whose employer uses a PEO, will need to obtain the non-PEO employer's FEIN/EIN because the FEIN/EIN that appears on their W-2 is that

of the PEO. A PEO is not the same as a staffing agency which instead is the sole employer of an individual who performs their work for a different organization.

A **direct employee** is an employee that is hired by and receives a W-2 to document their compensation from their employer or from a PEO contracted by the employer. An employee that is self-employed or receives an IRS Form 1099 is generally not considered a direct employee unless they are employed under a contract in a position or providing services that, under applicable state law, cannot be filled or provided by a direct employee of the **qualifying employer**.

An **Authorized Official** is an individual who by the authority of an employer has access to the borrower's employment or service records and is authorized by the employer to certify the employment status of the organization's employees or former employees, or the service of AmeriCorps or Peace Corps volunteers.

The **employment period** is the time between the employment or certification begin date and the employment or certification end date provided on the form or, if the borrower indicates they are still employed, the time between the employment or certification begin date and the date the Authorized Official certifies the form. Borrowers are encouraged to certify their employment annually or when they change employers or employment status.

**Employment status** is the determination of whether the borrower is Full-Time or Part-Time during the employment period on the form. A separate form must be submitted when there is a change in employment status with the same employer. A borrower with multiple simultaneous qualifying Part-Time employers during the same period can be considered to meet Full-Time employment if the Part-Time hours at each employer total 30 or more hours.

**Full-Time** employment, for PSLF purposes, means working 30 or more hours per week on average for the employment period on the form regardless of whether the employer considers that Full-Time for other purposes. Working less than 30 hours per week on average is considered Part-Time. When determining if a borrower is Full-Time, an employer must include all hours, including vacation, leave time, or any leave taken under the Family Medical Leave Act of 1993. However, do not include time spent performing volunteer services. If a borrower is employed on a contractual basis where they provide an average of 30 hours of work per week for a minimum of 8 months in a 12 month period, such as in an educational setting, but they continue to be considered employed for the full year, they should be considered Full-Time for the full 12 months.

If the borrower performs non-tenure track employment, such as an adjunct or non-tenure track faculty member, the employer can calculate the weekly average hours for determining Full-Time status by using a formula that multiplies the contact hours per week by at least 3.35 hours.

An **acceptable signature** for this form includes:

- a handwritten signature in dark ink,
- a hand drawn electronic signature made using a mouse or finger on a digital device, or
- a digitized image of a handwritten signature that has been embedded on the signature line of this form.

Other forms of signatures including certificate-based signatures and typed names, even if using a font that mimics cursive text, are NOT acceptable signatures for this form.

Deleted: ,

Deleted: <#>¶

### General Definitions Related to PSLF and Student Loans

**NOTE: Additional PSLF and TEPSLF specific terms are defined in-context in Section 10.**

A loan enters **default** when a borrower's payment is delinquent more than 270 days. A loan in default is not eligible for PSLF and payments made while in default are not eligible payments for PSLF. A borrower can resolve a defaulted loan by contacting their servicer.

A **deferment** is a period during which you are allowed to postpone making payments temporarily, on the basis of meeting the eligibility requirements for the deferment.

**Eligible Loans** are loans made under the William D. Ford Federal Direct Loan (Direct Loan) Program that are not in default.

An **eligible payment** is a payment that is both made in-full and on-time, meaning the full scheduled amount due must be received on or after the most recent due date and before the due date of the current month.

Deleted: made in full for a month that you are repaying your loan under an eligible repayment plan or is the equivalent of an eligible payment attributed to a month in which you are in repayment. For a payment to be an eligible payment under the Repayment Assistance Plan, the payment must be

Deleted: between

Deleted: y

Deleted: due date

A **forbearance** is a period during which you are allowed to postpone making payments temporarily, allowed an extension of time for making payments, or temporarily allowed to make smaller payments than scheduled.

An **Income Driven Repayment (IDR) plan** is a repayment plan that bases your monthly payment on your annual income and family size. These plans are qualifying repayment plans for PSLF and are, generally, the only plans that would have a remaining loan balance after you have made 120 qualifying payments. You must recertify your income annually to remain on an IDR plan.

A **qualifying employer** is a U. S. based governmental organization, an organization under Section 501(c)(3) of the Internal Revenue Code that is exempt from taxation under section 501(a) of the Internal Revenue Code, or a non-profit organization that dedicates a majority of its full-time equivalent employees to providing certain non-governmental public services. Serving in an AmeriCorps or Peace Corps position is also qualifying employment.

A **qualifying payment** is recorded when an eligible payment (or equivalent) is matched to a

Deleted: -----Section Break (Next Page)-----

month of eligible full-time employment with a qualifying employer.

- Activities that may result in the determination that an employer has a **substantial illegal purpose** include: aiding or abetting violations of Federal immigration laws; Helping, encouraging, or participating in violations of federal immigration laws, such as illegal entry or other violations of the Immigration and Nationality Act (8 U.S.C. 1325; see also 8 U.S.C. 1101 et seq.). Aiding or abetting has the same meaning as in 18 U.S.C. 2.
- supporting terrorism, including by facilitating funding to, or the operations of, cartels, or by engaging in violence for the purpose of obstructing or influencing Federal Government policy; Providing money, resources, or other support to terrorist organizations (including cartels designated as Foreign Terrorist Organizations under 8 U.S.C. 1189) or committing violence to obstruct or influence federal government policies. Terrorism is defined in 18 U.S.C. 2331. violent acts aimed at government policy are covered under 18 U.S.C. 1501 et seq., and crime of violence is defined in 18 U.S.C. 16.
- engaging in the chemical and surgical castration or mutilation of children in violation of Federal or State law; Performing procedures on individuals under 19 that alter or remove sexual organs or attempt to change their physical appearance to match a gender identity different from their biological sex, in violation of federal or state law.
- engaging in the trafficking of children to States for purposes of emancipation from their lawful parents in violation of Federal or State law; Transporting individuals under 19 across state lines without parental or guardian consent to remove them from lawful parental control or legal guardianship, in violation of federal or state law.
- engaging in a pattern of aiding and abetting illegal discrimination; or Repeatedly helping or encouraging violations of federal anti-discrimination laws, such as those prohibiting discrimination based on race, disability, or age (42 U.S.C. 1981 et seq.; 42 U.S.C. 12101 et seq.; 29 U.S.C. 621 et seq.). Aiding or abetting has the same meaning as in 18 U.S.C. 2.
- engaging in a pattern of violating State laws; Repeatedly committing minor crimes under state law, including trespassing, disorderly conduct, creating a public nuisance, vandalism, or blocking highways. A violation requires a final, non-default judgment by a state court.

Formatted: Font: Not Bold

Deleted: Substantial illegal purposes that may result in the revocation of an employer's qualifying status include:¶

Formatted: Font: Not Bold

Formatted: Font: 12 pt

Formatted: Normal, Indent: Left: 1", No bullets or numbering

Formatted: Font: 12 pt

Formatted: Normal, Indent: Left: 1", No bullets or numbering

Formatted: Font: 12 pt

Formatted: Normal, Indent: Left: 1", No bullets or numbering

Formatted: Font: 12 pt

Formatted: Normal, Indent: Left: 1", No bullets or numbering

Formatted: Font: 12 pt

Formatted: Normal, Indent: Left: 1", No bullets or numbering

Formatted: Font: 11 pt

Formatted: Font: 12 pt

Formatted: Normal, Indent: Left: 1", No bullets or numbering

## Section 8: Where to Send This Form

Return the completed form and any documentation to:

**Mail to:**  
U.S. Department of  
Education P.O. Box 300010  
Greenville, TX 75403

**Fax to:** 540-212-2415  
**To upload:** Log in to [StudentAid.gov](https://StudentAid.gov)  
and visit My Activity

---

## Section 9: Help With Completing the Application

If you need help completing this form, contact us:

**Phone:** 1-888-303-7818 (TTY: dial 711, then phone number)

**Website:** [StudentAid.gov](https://StudentAid.gov)

---

## Section 10: Important Information About PSLF and TEPSLF

Terms in **Bold** are defined in Section 7.

The Public Service Loan Forgiveness (PSLF) program was created by Congress in October 2007. A borrower qualifies for forgiveness of any remaining principal and interest on their **eligible loans** once they have made the equivalent of 120 **qualifying payments** after October 1, 2007, while employed **full-time** with a **qualifying employer**. Congress authorized a Temporary Expansion of the PSLF program (TEPSLF) in March 2018, that allowed borrowers that were otherwise eligible for PSLF to become eligible if the only reason they did not qualify for PSLF was because some or all of their payments were made under certain ineligible repayment plans. For a more comprehensive overview of these programs, including FAQ's, visit [StudentAid.gov/publicservice](https://StudentAid.gov/publicservice).

### Loan Eligibility

Only Direct Loan Program loans ([including Direct Consolidation Loans](#)) that are not in **default** are eligible for PSLF. Loans you received under the Federal Family Education Loan (FFEL) Program, the Federal Perkins Loan (Perkins Loan) Program, or any other student loan program are not eligible for PSLF.

Eligible payments made on the original Direct Loans before consolidation will be added as eligible payments to the new Direct Consolidation Loan based on a weighted average of the loans that were included in the Direct Consolidation Loan.

### Eligible Repayment Plans

Your payments must be made under a qualifying repayment plan. Qualifying repayment plans for PSLF include:

any of the following Income Driven Repayment (IDR) plans:

- [Repayment Assistance Plan](#),
- Income-Based Repayment (IBR),
- Pay As You Earn (PAYE), (prior to 7/1/2028),
- Income-Contingent Repayment (ICR) (prior to 7/1/2028)

**Deleted:** , to encourage employment in the public service sector

**Deleted:** an

**Deleted:** If you have FFEL Program or Perkins Loan Program loans, you may consolidate them into a Direct Consolidation Loan to take advantage of PSLF. However, payments made on those loans before you consolidated them do not count as eligible PSLF payments. In addition, if you made eligible

**Deleted:** on a

**Deleted:** and then

**Deleted:** consolidate

**Deleted:** it into a Direct Consolidation Loan, the eligible payments you¶  
-----Section Break (Next Page)-----  
made on the original Direct Loan(s)

**Formatted:** Right: 0.26", Space Before: 12.1 pt

**Deleted:** c

**Deleted:** ed

**Deleted:** If you are planning to consolidate your FFEL Program or Perkins Loan Program loans into a Direct Consolidation Loan to take advantage of PSLF and do not have any Direct Loans, do not submit this form until you have consolidated your loans. The online application for Direct Consolidation Loans contains a section that allows you to indicate that you are consolidating your loans for PSLF.¶  
If you plan to consolidate Perkins Loan Program loans, first understand that Perkins Loan Program loans may be cancelled for certain types of public service. If you consolidate a Perkins Loan Program loan, you will no longer be eligible for Perkins cancellation.¶

The online application is available at [StudentAid.gov/consolidation](https://StudentAid.gov/consolidation). If you don't know whether you have Direct Loans, log in to your account on [StudentAid.gov](https://StudentAid.gov).¶

### Payment Eligibility¶

An eligible payment is one that is made in full for a month that you are repaying your loan under an eligible repayment plan or is the equivalent of an eligible payment attributed to a month in which you are in repayment. Only eligible payments made on or after October 1, 2007, can become a qualifying payment for PSLF or TEPSLF.¶

A payment is considered made in full if it is received for the full amount due based on your scheduled payment or if you make multiple payments within the payment period that add up to at least the full scheduled amount due. A payment is also considered paid in full if it is any of the eligible payment equivalents described in this section and whether you are in repayment under an IDR plan (... [1])

**Deleted:** Plan

**Deleted:** <#> Saving on a Valuable Education (SAVE) (formerly REPAYE),¶

**Deleted:** <#> Plan

**Deleted:** Plan

The 10-Year Standard Repayment plan, or any other Direct Loan repayment plan (except the Tiered Standard plan and Alternative Repayment plan), if those payments are at least equal to the monthly payment amount that would be required under the 10-Year Standard Repayment plan.

Deleted: <#>. Or¶

**NOTE:** The Standard Repayment Plan for Direct Consolidation Loans made on or after July 1, 2006, and before July 1, 2026, has repayment periods that range from 10 to 30 years. Monthly payments you make under this plan are eligible payments for PSLF only if the repayment period is 10 years. This repayment plan is always a qualifying repayment plan for TEPSLF (for more information regarding eligible repayment plans for TEPSLF, see below). Borrowers with any loan made on or after July 1, 2026, are ineligible for this plan regardless of when their other Direct Loans were made.

Deleted: .....Section Break (Next Page).....

While repayment plans other than an IDR plan may be qualifying repayment plans for PSLF, you must have a remaining balance to forgive when you reach 120 qualifying payments. Otherwise, your loans will be fully repaid within 10 years. You will generally only have a remaining balance if you have been repaying under an IDR plan. To apply for an IDR plan, visit [StudentAid.gov/idr/](http://StudentAid.gov/idr/).

### Payment Eligibility

An eligible payment is one that is made in full for a month that you are repaying your loan under an eligible repayment plan or is the equivalent of an eligible payment attributed to a month in which you are in repayment. Only eligible payments made on or after October 1, 2007, can become a qualifying payment for PSLF or TEPSLF.

A payment is made in full only if it is received for the full amount due based on your scheduled payment or if multiple payments are made within the payment period that add up to at least the full scheduled amount due. A payment is also considered paid in full if it is any of the eligible payment equivalents described in this section and whether you are in repayment under an IDR plan other than the Repayment Assistance Plan.

Deleted: considered

Deleted: you make

### Eligible Payment Equivalents

A payment equivalent is a payment made that exceeds your monthly scheduled payment due and also satisfies a future scheduled payment. This is often referred to as a lump sum payment. The number of payment equivalents depends on the amount received and your scheduled monthly payment due. However, if you are enrolled in the Repayment Assistance Plan, you are ineligible to receive matching principal or interest subsidies provided if you choose to receive the payment equivalents. If you are enrolled in the Repayment Assistance Program, you will need to waive the advancement of your due date in order to receive your principal or interest subsidies and continue making your scheduled payment. You cannot receive a payment equivalent beyond your next IDR recertification date or 12 months, whichever is sooner. Any payment equivalent in excess of your recertification date or made when you opt out of advancing your due date will be applied to principal. These payment equivalents will not result in additional eligible payments.

Deleted: You can receive a

Deleted: by making

Deleted: so long as it

Deleted: will not be

Deleted:

Formatted: No underline

Deleted: under the plan

Deleted: for PSLF. Thus, i

Deleted: s

Deleted: this amount

Deleted: but

Scheduled payments are those that are made while you are in repayment. They do not include  
Federal Student Aid | StudentAid.gov

payments made while your loans are in an in-school or grace status, or in a deferment or forbearance status (except those included below).

Receiving one of the following deferments or forbearances at any time during a month is equivalent to an eligible payment [while you are in repayment under an IDR plan other than the Repayment Assistance Plan](#):

- Cancer treatment deferment,
- Economic hardship deferment,
- Military service deferment,
- Post-active-duty student deferment,
- AmeriCorps forbearance,
- National Guard Duty forbearance,
- U.S. Department of Defense Student Loan Repayment Program forbearance,
- Administrative forbearance; or
- Mandatory administrative forbearance

### Employment Eligibility

To qualify for PSLF, you must be a **direct employee** of a qualifying employer. A direct employee is someone who is hired and paid by the employer, and who receives an IRS Form W-2 from the employer. You may physically perform your work at a qualifying or non-qualifying organization, as long as you are a direct employee of a qualifying employer.

However, if you are employed under a contract in a position or providing services that, under applicable State law, cannot be filled or provided by direct employees of the qualifying employer, you can be treated as a direct employee of the qualifying employer where you perform your work.

### Qualifying Employer

For PSLF, a qualifying employer is a:

- U.S. based governmental organization (at the federal, state, local, or Tribal level, including the U.S. Armed Forces and National Guard)
- tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code (IRC), or
- non-profit organization that provides certain non-governmental public services.

Service in an AmeriCorps position approved by the Corporation for National and Community Service under Section 123 of the National and Community Service Act of 1990 (42 U.S.C. 12573) or a full-time assignment in a Peace Corps position under 22 U.S.C. 2504 is also qualifying employment.

Deleted: ¶  
.....Section Break (Next Page).....

Deleted: a

Deleted: a

**Deleted:** Additionally, a qualifying employer must not be determined by the Secretary through a preponderance of evidence and opportunity to respond to have engaged on or after July 1, 2026 in illegal activities such that the employer is found to have a **substantial illegal purpose**. Such determinations will be made known in the **PSLF employer database**.¶

A non-profit organization that is not a tax-exempt organization under Section 501(c)(3) of the IRC may be a qualifying organization if a majority of its full-time equivalent employees are engaged in one or more specific non-governmental public services.

These services include:

- Emergency management,
- Civilian service to military personnel,
- Military service,
- Public safety,
- Law enforcement services,
- Public health services,
- Public education,
- Public library services,
- School library and other school-based services,
- Public interest legal services,
- Early childhood education, and
- Public service for individuals with disabilities and the elderly.

Full definitions of each of these non-governmental public services are available at [StudentAid.gov/publicservice](https://studentaid.gov/publicservice).

### ***Non-Qualifying Employer***

For PSLF, a qualifying employer cannot be:

- a business organized for profit,
- a labor union,
- a partisan political organization, or
- the U.S. Congress (if you are employed as a Representative or Senator).

Additionally, on or after July 1, 2026, an employer that the Secretary has determined under 34 CFR 685.219 to have a **substantial illegal purpose** is not a qualifying employer.

Such determinations will be made known in the [PSLF employer database](#).

### ***Full-Time Employment***

Formatted: Not Expanded by / Condensed by

Deleted: <#>-----Section Break (Next Page)-----

Deleted: a

Deleted: or

Deleted: .

Formatted: Not Expanded by / Condensed by

Deleted: employment as a member of

Deleted: '

Deleted: is not a qualifying employer

Deleted: <#>|

[2]

Formatted: Font: Not Bold

For PSLF purposes, **full-time** means at least an average of 30 hours per week for the employment period being certified.

All hours for which you are paid should be included in the average hours worked per week, however, time spent performing volunteer work should not be included.

Vacation or leave time provided by the employer or leave taken for a condition that is a qualifying reason for leave under the Family and Medical Leave Act of 1993, 29, U.S.C. 2612(a)(1) and (3) should be included in the average hours worked per week.

If you are a teacher or in another position under contract for at least eight out of 12 months, you meet the full-time standard if you work an average of at least 30 hours per week during the contractual period and receive credit by your employer for a full year's worth of employment.

If you are a non-tenure or adjunct faculty member at an institution of higher education meaning you are paid solely for the credit hours you teach, you meet the definition of full-time if you are employed the equivalent of 30 hours per week as determined by multiplying each credit or contact hour taught per week by at least 3.35.

**If you are employed part-time by more than one qualifying employer simultaneously, you may meet the full-time employment requirement if you work a combined average of at least 30 hours per week with your employers.**

### Qualifying Payment

You must accumulate 120 **qualifying payments** to have your eligible loans forgiven through PSLF. These qualifying payments do not need to be consecutive.

An **eligible payment** is considered to become a **qualifying payment** when the month to which the eligible payment is attributed is matched to a month that you have certified full-time employment with a **qualifying employer**.

### TEPSLF Eligibility

To qualify for TEPSLF, you must be ineligible for PSLF *only* because some or all of your payments were not made [under the Extended, Graduated, or Consolidation Standard Plans](#) and if the payment that you made 12 months prior to reaching 120 qualifying payments for TEPSLF and the 120<sup>th</sup> qualifying payment were at least as much as you would have paid under the lowest payment available to you on an **IDR plan** [other than the Repayment Assistance Plan](#).

If you meet these requirements, you will be evaluated for TEPSLF eligibility under the expanded list of qualifying repayment plans for TEPSLF which include the:

- Qualifying repayment plans for PSLF [except the Repayment Assistance Plan](#),
- Graduated Repayment Plans,

Deleted: ¶  
-----Section Break (Next Page)-----

Formatted: Font: Not Bold

Deleted: under a qualifying repayment plan for PSLF

Formatted: Font: Not Bold

- Extended Repayment Plans,
- Standard Repayment Plan for Direct Consolidation Loans, and
- Graduated Repayment Plan for Direct Consolidation Loans,

Additionally, borrowers whose only available IDR plan is the Repayment Assistance Plan because they have a loan made on or after July 1, 2026, cannot be considered for TEPSLF eligibility.

### Other Important Information

The period of service used to qualify for Teacher Loan Forgiveness or Civil Legal Assistance Attorney Student Loan Repayment programs cannot also count as eligible payments for PSLF.

You have the option to request a **forbearance** on your Direct Loans if you are submitting this form and you believe that you qualify for forgiveness right now because you have made 120 qualifying payments. However, when evaluating whether to choose forbearance, it is important to understand that these periods of forbearance will not count toward PSLF or TEPSLF if it is determined you do not have 120 **qualifying payments** yet. Note: If you do not request a forbearance, any payments made after your 120th qualifying payment will be refunded to you or applied to any other outstanding loans held by the Department.

If you have a month in your payment history that would otherwise count as a qualifying payment, but it is not because you were in a **deferment** or **forbearance** status other than those that are considered an eligible payment equivalent, you can take action to make that month a qualifying payment. To do so you must make a payment of at least as much as what you would have made under an IDR plan that you were eligible for each month that meets the condition. More information about this process is available at [StudentAid.gov/publicservice](https://studentaid.gov/publicservice).

Formatted: Not Expanded by / Condensed by

Formatted: Normal, Indent: Left: 0.25", No bullets or numbering

Formatted: Font: 12 pt

## Section 11: Important Notices

### Privacy Act Statement.

**Authority:** The authorities for collecting the requested information from and about you are §421 et seq., §451 et seq., or §461 of the Higher Education Act of 1965, as amended (HEA) (20 U.S.C. 1071 et seq., 20 U.S.C. 1087a et seq., or 20 U.S.C. 1087aa et seq.) and the authorities for collecting and using your Social Security number (SSN) are §§428B(f) and 484(a)(4) of the HEA (20 U.S.C. 1078-2(f) and 1091(a)(4)) and 31 U.S.C. 7701(b). Participating in the William D. Ford Federal Direct Loan (Direct Loan) Program, Federal Family Education Loan (FFEL) Program, or Federal Perkins Loan (Perkins Loan) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

**Purpose:** 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, FFEL, or Federal Perkins Loan Programs, to permit the servicing of your loans, and, if it becomes necessary, to locate you and to collect and report on your loans if your loans become delinquent or default. We also use your SSN as an account identifier and to permit you to access your account information electronically.

**Routine Uses:** [The information provided on this form will only be disclosed outside of the Department with prior written consent or as otherwise allowed by the Privacy Act of 1974, as amended \(Privacy Act\) \(5 U.S.C. 552a\). The Privacy Act's requirement for prior written consent has an exception for disclosure, without consent, for "routine uses" that the Department publishes in our System of Records Notices \(SORNs\). The Department may disclose, without consent, the information provided on this form pursuant to the routine uses identified in the "Common Services for Borrowers \(CSB\)" \(18-11-16\) SORN, which is available on the Department's "Privacy Act System of Record Notice Issuances \(SORN\)" webpage located at <https://www.ed.gov/about/ed-overview/required-notices/privacy/privacy-act-system-of-record-notice-issuances>.](#)

**Effects of Not Providing Information:** Providing information on this form, including an aid recipient's SSN, is voluntary; however, if not enough information is provided to process this form, the request may be delayed or denied.

**Paperwork Reduction Notice.** 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 1845-0110. Public reporting burden for this collection of information is estimated to average 30 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 required to obtain a benefit (34 CFR 685.219).

If you have comments or concerns regarding the status of your individual submission of this form,

#### Deleted: Number

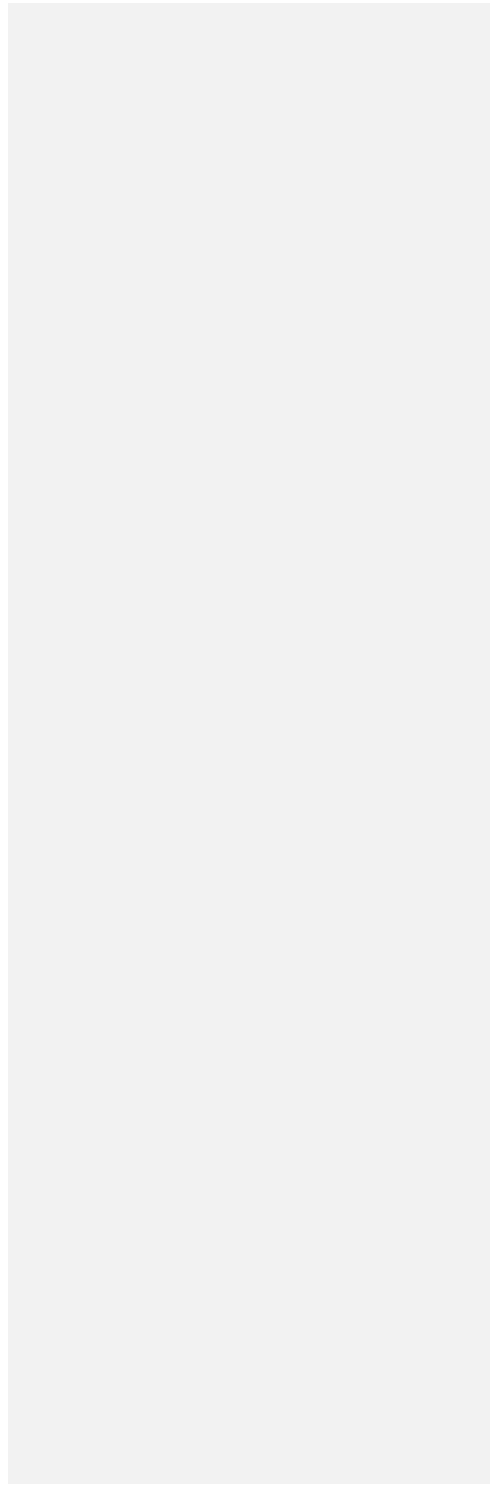
**Deleted:** The information in your file may be disclosed, on a case-by-case basis or under a computer matching program, to third parties as authorized under routine uses in the appropriate systems of records notices.

#### Deleted: These routine uses include, but are not

¶ 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. To permit originating, disbursing, servicing, collecting, assigning, adjusting, transferring, referring, furnishing of credit information, or discharging title IV, HEA obligations, disclosures may be made to guaranty agencies, educational institutions, or financial institutions that originated, held, serviced, or have been assigned the title IV, HEA obligation, and¶

Section Break (Next Page)  
their authorized representatives; to a party identified by the debtor as willing to advance funds to repay the title IV, HEA obligation; 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. To investigate possible fraud or abuse or to verify compliance with contractual requirements or Federal, State, local, or Tribal statutory, regulatory, or program requirements, disclosures may be made to guaranty agencies, educational and financial institutions, third-party servicers, and their authorized representatives; to Federal, State, Tribal, or local agencies, and their authorized representatives; to private parties, such as relatives, present and former employers, and business and personal associates; to creditors; to consumer reporting agencies; and to adjudicative bodies. To verify whether a title IV, HEA obligation qualifies for discharge, 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, present and former employers, and business and personal associates; to creditors; to consumer reporting agencies; and to adjudicative bodies.¶

please contact us (see Section 9).



Page 11: [1] Deleted

Author

Page 14: [2] Deleted

Author