

**BORROWER PROSPECTUS INFORMATION****INSTRUCTIONS FOR PREPARATION****Purpose:**

This letter provides information to the lender regarding borrowers who may be able to graduate.

**Handbook Reference:**

4-FLP

**Number of Copies:**

Original and Three Copies

**Signatures Required:**

Authorized Agency Official

**Distribution of Copies:**

Original will be sent to the lender. A copy will be placed in FLPF-4-b Graduation file. A redacted copy (if other names listed) will be sent to the borrower, and a redacted copy (if other names listed) will be placed with the transmittal memo to the borrower in position 4 of the case file.

**Automation-Related Transactions:** n/a

**All Items are to be completed for all actions.**

| Item                                            | Instruction                                                                     |
|-------------------------------------------------|---------------------------------------------------------------------------------|
| Date                                            | Enter Date (Month Day, Year) signed by Authorized Agency Official.              |
| Lender's Name/<br>Address                       | Enter the name of the lender's representative, lender name and mailing address. |
| Dear                                            | Enter the name of the lender's representative.                                  |
| Borrower's Name                                 | Enter all borrowers' names being referred to lender.                            |
| Eligible for FSA<br>Guarantee                   | Check the appropriate box.                                                      |
| Total Existing<br>FSA Term<br>Loan(s)           | Enter the total amount of outstanding FSA loan(s).                              |
| Estimated Loan<br>Needed                        | Enter the estimated loan amount the borrower needs.                             |
| Service Center                                  | Enter the local Servicing Office's name.                                        |
| Contact                                         | Enter the local Servicing Office's address and telephone number.                |
| Authorized<br>Agency<br>Official's Name         | Enter the Authorized Agency Official's Name.                                    |
| Authorized<br>Agency<br>Official's<br>Signature | Enter Authorized Agency Official's Signature                                    |
| Authorized<br>Agency<br>Official's<br>Signature | Enter Authorized Agency Official's Signature                                    |
| Item                                            | Instruction                                                                     |

|                                          |                                          |
|------------------------------------------|------------------------------------------|
| Authorized<br>Agency<br>Official's Title | Enter Authorized Agency Official's Title |
|------------------------------------------|------------------------------------------|