

# 2026-2027 Loan Discharge Statement Form

**Directions:** The National Student Loan Data System (NSLDS) indicates that you have one or more federal student loans and/or TEACH Grant service obligation(s) discharged because of total and permanent disability. Before you are eligible to receive your offered financial aid, you must complete this form and submit with supporting documentation if necessary.

**How to Submit Form:** This form can be submitted via the [Document Uploader](#).

## STEP 1: INTENT TO PURSUE

Complete this section on your intent to pursue Federal Loan Aid for 2026-2027:

**No: I am not interested in receiving Federal Loans.** I understand that my current offered or accepted loan(s) will be cancelled so that my previously discharged loans will not be affected.

**Yes: I am interested in receiving Federal Loans.** I will submit a physician's letter\* on official letterhead stating that I can engage in "substantial gainful activity" such as working or attending school. This letter will override the previously established total and permanent disability status. \*\*

**Yes: I am interested in receiving Federal Loans.** I have a physician's letter\* on file from a prior year. Prior approval must be within three academic years from the date of the physician's letter. \*\*

\*For students interested in receiving new loans, a physician's letter must be provided by a Doctor of Medicine (MD) or Doctor of Osteopathy (DO).

\*\*I acknowledge that by requesting new federal student loan(s), my previously conditionally discharged loan(s) will be removed from their current conditional discharge status and the Department of Education will reinstate my obligation to repay the conditionally discharged loan(s). I also acknowledge that neither the previous conditionally discharged loan(s) nor the new loan(s) requested can be discharged in the future on the basis of any present impairment unless that condition substantially deteriorates to the extent that the definition of total and permanent disability is again met.

## STEP 2: CERTIFICATION STATEMENT

Your signature on this document confirms your acknowledgment of the following:

- The information submitted for review is true and correct to the best of my knowledge. I have read each step.
- Providing false information may result in reduced eligibility, repayment of aid, or both in this year or next year.
- Additional documentation may be required.
- During peak seasons processing times may be longer.

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

With a few exceptions, you are entitled on your request to be informed about the information U.T. San Antonio collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review this information. Under Section 559.004 of the Texas Government Code, you are entitled to have U.T. San Antonio correct information about you that is held by us and that is incorrect, in accordance with the procedures set forth in the University of Texas System Business Procedures Memorandum 32. The information that U.T. San Antonio collects will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the Texas Government code) and rules. Different types of information are kept for different periods of time.

### OFFICE USE ONLY:

Date: \_\_\_\_\_ Received By: \_\_\_\_\_ Processed By: \_\_\_\_\_

RRAAREQ Code: C-DISA & C-TDIS • WebX Code: FA\_C-DISA

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