



Teacher Loan Forgiveness Application

William D. Ford Federal Direct Loan (Direct Loan) Program, Federal Family Education Loan (FFEL) Program

OMB No. 1845-0059
Form Approved
Exp. Date: 12/31/2026

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 Identification

Please enter or correct the following information.

If you log in to your account and download this pre-filled form, write in your SSN here – even if your account number is also printed.

☐ Check this box if any of your information has changed.

Social Security Number (SSN):

Name:

Address:

City: State: Zip Code:

Telephone - Primary:

Telephone - Alternate:

Email (Optional):

Please provide your SSN and phone numbers. You don't have to fill out your address again since it's printed on the form you received in the mail.

Section 2: Loan Forgiveness Request (To Be Completed By The Borrower)

READ SECTIONS 6 - 11 BEFORE COMPLETING THE APPLICATION. The information you provide may be subject to verification.

I request forgiveness on my Direct Loan and/or FFEL program loans based on my employment as a full-time teacher for at least five consecutive, complete academic years. During that five-year period, I taught (check all that apply):

☐ at an eligible **elementary school**

☐ at an eligible **secondary school**

☐ for an eligible **educational service agency**

Be sure both selections are either "elementary" or "secondary".

Teacher Loan Forgiveness (TLF) Application Walkthrough (continued)

If you log in to your account and download this pre-filled form, write in your SSN here – even if your account number is also printed.

Borrower's Name: _____

Borrower's SSN: _____

AND I was (check all that apply):

It's okay to select more than one box if applicable. BUT – only select options with the same amount (\$17,500 or \$5,000) listed. You can only apply for 1 amount.

- ☐ A highly qualified full-time special education teacher for elementary school children with disabilities (*forgiveness of up to \$17,500*).
- ☐ A highly qualified full-time special education teacher for secondary school children with disabilities (*forgiveness of up to \$17,500*).
- ☐ A highly qualified full-time mathematics teacher for secondary school students (*forgiveness of up to \$17,500*).
- ☐ A highly qualified full-time science teacher for secondary school students (*forgiveness of up to \$17,500*).
- ☐ A highly qualified full-time secondary education teacher, or (only if my teaching service began before 10/30/2004) a full-time secondary education teacher in a subject area relevant to my academic major (*forgiveness of up to \$5,000*).
- ☐ A highly qualified full-time elementary education teacher, or (only if my teaching service began before 10/30/2004) a full-time elementary education teacher and I demonstrated knowledge and teaching skills in reading, writing, mathematics, and other areas of the elementary school curriculum (*forgiveness of up to \$5,000*).

Section 3: Previous Loan Forgiveness Information (To Be Completed By The Borrower)

Have you previously applied for or received loan forgiveness from a loan holder or servicer other than the loan holder/servicer to which you are submitting this application for Teacher Loan Forgiveness?

☐ No - Skip to Section 4.

If you check "No", leave all lines below blank.

☒ Yes - Check the appropriate box below and provide the requested information.

☐ I applied for loan forgiveness with the loan holder/servicer listed below, but have not yet received forgiveness. Provide the loan holder/servicer information requested below; leave "Forgiveness Amount" blank.

☐ I applied for and received loan forgiveness with the loan holder/servicer listed below. Provide the loan holder/servicer and forgiveness amount information requested below.

Loan Holder Name _____

Telephone or Website _____

Forgiveness Amount \$ _____

If you've previously applied for loan forgiveness, check "Yes", select the situation that best describes yours, and provide the requested information.

Teacher Loan Forgiveness (TLF)
Application Walkthrough (continued)

Borrower's Name: _____

Borrower's SSN: _____

Section 4: Understandings, Certifications, and Authorization (To Be Completed By The Borrower)

I understand that: **(1)** my loan holder will apply a forbearance of principal and interest on my qualifying loans from the date my loan holder receives my completed loan forgiveness application through the date my loan forgiveness request is approved or denied, unless I notify my loan holder that I want to continue making regular payments during this period; **(2)** if I continue making regular payments while my application is being reviewed, this may reduce the amount of my loan forgiveness; **(3)** if I am past due on payments when this application is processed, my loan holder may grant a separate forbearance to resolve the delinquency; and **(4)** unpaid interest that accrues during each of these forbearance periods will not be capitalized on a Direct Loan Program loan, but it may be capitalized on a FFEL Program loan.

I certify that: **(1)** the information I provided in Sections 1-3 is true and correct; and **(2)** I have read and understand the definitions and terms and conditions in Sections 9-11, and I meet the eligibility requirements for loan forgiveness.

I authorize the entity to which I submit this request and its agents to contact me regarding my request or my loans at any cellular telephone number that I provide now or in the future using automated telephone dialing equipment or artificial or prerecorded voice or text messages.

Borrower's Signature: _____

Date (mm/dd/yyyy): _____

Print this form out and sign your name here.

Select from the calendar dropdown or input a date as mm-dd-yyyy.

Teacher Loan Forgiveness (TLF)
Application Walkthrough (continued)

Borrower's Name: _____ Borrower's SSN: _____

Section 5: Chief Administrative Officer's (CAO's) Certification (To Be Completed By The CAO)

Carefully read Sections 6-11. Return the completed form to the applicant identified in Section 1.

I **certify**, to the best of my knowledge and belief, that: **(1)** the applicant has met the requirements for loan forgiveness as specified in Sections 9-11, and **(2)** during the period for which the applicant is seeking forgiveness, the applicant was a teacher as defined in Sections 9 and 10 and taught full time for one or more consecutive, complete academic years at one or more eligible Title I schools or educational service agencies (ESAs) in the capacity that the applicant indicated in Section 2 from (mm/dd/yyyy) _____ to _____

School (not school district) or ESA Name _____

☐ Check here if this is a school operated by the Bureau of Indian Education (BIE) or operated on an Indian reservation by an Indian tribal group under contract with the BIE.

School or ESA Address (Street, City, State, Zip Code) [View the TCLI directory on StudentAid.gov.](#)

Street _____

City _____ State _____ Zip Code _____

School or ESA Website _____

School District _____

County _____

CAO's Name and Title (Printed) _____

• CAO's Signature _____

Date (mm/dd/yyyy) _____

Telephone _____

Email (Optional) _____

Have the CAO sign their name here.

Signature date must be:

- After service end date
- In mm-dd-yyyy format

Everything in this section is required except email.