Teacher Cancellation Addendum

Part 1 - To Be Completed By Borrower

Borrower Name (Last, First, Initial):	Account Number:	Social Security Number:
Address: City: State: Zip:		Telephone Number:

Part 2 - To Be Completed By Employer

The borrower indicated above has applied for a cancellation of their student loan based on their employment as a teacher. In order for a cancellation request to be honored the employer must respond to the following questionnaire.

		Yes	No
1	Is the above referenced borrower employed by your institution as a teacher?		
2	Is employing institution a public or other nonprofit elementary or secondary school system?		
3	Please indicate borrower's **full-time** employment start date: (Excluding student teaching).		
4	If response to question 1 was no, please indicate job title of borrower:		
5	If the borrower is not a teacher, does the employing institution still consider the borrower to be a full-time professional for purposes of salary, tenure, retirement benefits, etc. (e.g. the ? borrower accrues the same benefits as teachers who are licensed and/or certified).		
6	Is borrower employed directly by the School District? If no, indicate employer:		
7	Is school where borrower is teaching a charter school? If so, please attach a copy of borrower's most recent paycheck stub and employment contract.		
8	Is borrower a full-time employee?		
9	Is borrower a substitute teacher?		
10	If response to question 9 is yes, please indicate day count: days. Please note: Day count requested must be for the time period from: through: .		
11	Does school serve students from low-income families? If so, please list the **name of the school(s) & county** where borrower is employed:		
12	Is borrower a special-education teacher? This would include teachers of infants, toddlers, children, or youth with disabilities in a public or nonprofit elementary or secondary school system.		
13	If your response to question 12 was yes, please indicate the percentage of students (in borrower's classroom) who are special-education students: %		
14	Is borrower a mathematics, science, foreign language or bilingual teacher?		
15	If your response to question 14 was yes, please indicate the specific subject taught:		
16	Please indicate the percentage of time the borrower teaches the subject indicated in question 15: %		
17	A copy of the borrower's official job description on school letterhead and signed by a school administrator must accompany this form. Is a job description enclosed?		

I certify that the information stated above is true and correct.

Certifying Organization: Telephone No:	Signature of Authorized Official:	
Address: City:	Title:	Date Signed:
State: Zip:	Forms may be faxed to: 517-353-9640	**Please return to:** **Loans Receivable** **Hannah Administration Building** **426 Auditorium Rd Rm 140** **East Lansing, MI 48824-2602**