

**UNIVERSITY OF KENTUCKY
COLLEGE OF NURSING**

NURSE FACULTY LOAN PROGRAM (NFLP) APPLICATION

I. INTRODUCTION

Section 846A of the Public Health Service Act authorized the Nurse Faculty Loan Program (NFLP) for schools of nursing to establish and operate a fund to increase the number of qualified nursing faculty. NFLP funds were awarded to the schools of nursing to make loans to students enrolled full-time in an advanced degree program (Master's, Doctor of Philosophy, and Doctor of Nursing Practice). Following graduation, NFLP borrowers receive up to 85% loan cancellation for completing an obligation to serve as faculty in schools of nursing. Students who meet the criteria below are encouraged to review the remainder of the information about this program and submit an application Kathy Collins **no later than August 6, 2007** in order to be considered. The application is contained in **EXHIBIT E** of this document.

Loan funds are contingent upon the University of Kentucky College of Nursing receiving funding from the Division of Nursing. Award decisions will be made in late August or September.

A. STUDENT ELIGIBILITY CRITERIA

1. Citizenship Status

A student applicant must be a citizen or national of the United States, or a lawful permanent resident of the United States, the Commonwealth of Puerto Rico, the Northern Mariana Islands, the Virgin Islands, Guam, American Samoa or the Trust Territory of the Pacific. A student who is in the United States on a student or visitor's visa is **NOT** eligible.

2. Enrollment Status

The student must be enrolled or accepted for enrollment as a full-time student in a graduate nursing degree program (a minimum of 9 credit hours both fall and spring semester). If an NFLP borrower ceases to be a full-time student, disbursement of NFLP funds will cease. Temporary leave from the graduate program that is approved by the school of nursing is not always considered to be a breach of the NFLP Promissory Note by the borrower. Examples of temporary leave include:

- A period up to 3 years during which the borrower is ordered to active duty as a member of a uniformed service of the United States (Army, Navy, Marine Corps, Air Force, Coast Guard, the National Oceanic and Atmospheric Administration Corps, or the U.S. Public Health Service Commissioned Corps). This does not include a borrower who either voluntarily joins a uniformed service or is employed by one of the uniformed services in a civilian capacity; and
- Family and medical leave as described in the Family and Medical Leave Act of 1993 (FMLA) (5 U.S.C. 6381-6387; 5 CFR part 630, subpart L). See <http://www.opm.gov/> for additional information.

3. Academic Status

The student must be in good standing (minimum GPA 3.0) in accordance with their applicable program and capable, in the opinion of the school, of maintaining good standing in the course of study. If an NFLP borrower ceases to be a student in good standing, disbursement of NFLP funds will be stopped.

4. Default on Other Federal loans

According to Federal law a student is ineligible to receive NFLP funds if a judgment lien has been entered against him/her based on the default on a Federal debt, 28 U.S.C. 3201(e).

B. LIST OF REQUIRED ADDITIONAL COURSES

Students who apply for NFLP funds will be expected to make a specific commitment to careers as nurse faculty during an entrance interview. Those provided NFLP loans will be required to enroll in the relevant degree program (MSN, DNP, PhD) and complete three courses in the University of Kentucky Preparing Future Faculty Program (described below) prior to graduation. This will provide them with specialization in an area of content and functional development in teaching and learning. Master's of Science in Nursing students will be encouraged to matriculate directly into one of the two doctoral programs in order to provide them with the terminal degree required for faculty careers.

The University of Kentucky Preparing Future Faculty Program

The Preparing Future Faculty Program is designed to help graduate students further develop their teaching skills and explore the various aspects of an academic career on a college or university campus. The Teaching and Learning Center oversees this program and has hardware, software, publications, and consultants to assist graduate students in the pedagogically sound use of instructional technologies. The goals of the Preparing Future Faculty Program are to help graduate students:

- Acquire information about the teaching and learning process and faculty roles at a variety of institutions of higher education.
- Gain a realistic perspective on the skills required for success as a faculty member.
- Examine their fit with an academic career in higher education in general and at specific institutions.
- Demonstrate, document, and reflect upon their teaching skills.
- Compete for faculty or other professional positions.

In order to be eligible for funding, graduate students must commit to enroll in and complete for credit three courses offered by this program. The courses and their descriptions are listed below.

GS 610 College Teaching (1 credit hour – offered Fall semester only)

This course addresses teaching and learning issues in the college classroom. It is intended for graduate students who want to prepare for future academic careers and enhance any current teaching activities. The seminar will examine pedagogical issues in a general format with opportunities for discipline-specific applications. This seminar will focus on making teaching and learning more effective, efficient, creative and enjoyable. The objectives of GS 600 are to:

1. Examine models of teaching and learning, resources for discipline-specific pedagogy, student diversity, and alternative strategies for teaching.
2. Acquire skills in making teaching and learning goals explicit, designing teaching strategies that contribute to those goals, and choosing assessment techniques that provide formative and summative feedback.
3. Value creating an inclusive learning community, investigating and applying innovative teaching techniques, and engaging in reflective teaching practice.

GS 650 Preparing Future Faculty (2 credit hours – offered fall and spring semester)

This course is designed to introduce graduate students to the roles and responsibilities of the college teacher and to assist them in understanding the variety of institutions in which effective teaching takes place. Through discussions, readings, and direct experience, students will focus on the academic expectations, institutional identities, and particular policies and procedures that characterize several different types of institutions of higher learning. They will also have the opportunity to develop skills to assist them in applying for teaching positions and achieving success in their first appointments. The objectives of the course are to assist students to:

1. Determine whether a college or university faculty position is a desirable goal.
2. Determine the qualities that characterize successful college teachers.
3. Identify the various expectations that prevail in different institutions of higher learning.
4. Develop the requisite skills for obtaining a faculty position at the institution of their choice.
5. Acquire some of the skills necessary for a successful academic career in college teaching.

GS 699 Practicum in College Teaching and Learning (3 credit hours - offered fall and spring)

The Practicum is a mentored teaching experience that not only immerses the graduate student in teaching, but also fosters reflection on the experience, provides structured feedback and plans for improvement, and guides students in developing a teaching portfolio. The practicum requires that the graduate student assume full responsibility for a course, under the guidance of a mentor teacher. Supervision for the practicum experience is a joint responsibility of the Teaching and Learning Center and the student's mentor. The practicum is distinct from many mentored Teaching Assistant experiences because the student must have full responsibility for the course, including syllabus and materials development, assessment, instructional responsibilities, and grade assignments. Credit will not be assigned until the graduate student has submitted a teaching portfolio that includes the practicum experience.

C. PROMISSORY NOTE

Each NFLP loan made to the student must be documented by a Promissory Note (**EXHIBIT C**) which describes the terms and conditions of the loan. The borrower must sign the Promissory Note prior to disbursement of loan funds. The Promissory Note is the legal document that binds the student to his/her repayment obligations.

D. ENTRANCE INTERVIEW

1. Timing

The student must participate in an entrance interview for each academic year during which the student receives NFLP funds. Borrowers will be required to complete a new "borrower information" form at the time of each disbursement.

EXHIBIT D is the Entrance Interview/Statement of Rights and Responsibilities that is reviewed and completed during the entrance interview. [Fiscal Management, Collections, Chapter 2](#) also addresses entrance interview requirements.

E. PAYMENTS TO STUDENTS

The College will determine the number and the amount of installments paid to the student. Payments will be credited to the student's tuition account.

II. TERMS AND CONDITIONS OF LOAN AWARD

A. SERVICE OBLIGATION

The NFLP is a loan cancellation program with a service obligation for recipients of the loan. To participate in the program, a student must commit to serving as faculty at a school of nursing following graduation. The Promissory Note, which specifies the terms and conditions of the NFLP loan and binds the student to his/her repayment obligation, states the service obligation requirement.

The NFLP borrower must submit certification of employment to the College of Nursing within 3 months following graduation. A sample form is provided as **EXHIBIT F**. At a minimum, the certification of employment must state the date the NFLP recipient began full-time employment as nurse faculty in accordance with the terms of the NFLP Promissory Note and must be signed and dated by the recipient. The recipient is responsible for submitting certification of employment to the College in order to determine the interest rate applicable to the unpaid loan balance.

B. REPAYMENT PROVISIONS

1. Beginning of the Repayment Period

The repayment period for an NFLP loan begins following a 9-month grace period after the borrower ceases to be a full-time student in the advanced nurse education program.

2. Grace Period

Neither interest nor principle is payable during the 9-month grace period. Interest will begin to accrue at the beginning of the fourth month of the 9-month grace period, but is not payable until the beginning of the repayment period following the grace period.

3. The Repayment Period

The unpaid loan balance is repayable in equal or graduated periodic installments over a 10-year repayment period. Installment payments must be made no less often than quarterly, in equal or graduated installments, in accordance with the terms of the schedule provided by the school and agreed to by the borrower.

4. Repayment Schedule

If the borrower is not employed full-time as nurse faculty at a school of nursing following graduation, or ceases to be enrolled as a full time student, the loan is repayable in equal or graduated periodic installments over a 10-year period that begins 9 months after the individual ceases to pursue a course of study in the College.

When the school has cancelled the maximum portion of the principle amount of the loan and the interest on (based upon each complete year of full-time employment required by the service obligation), the remaining amount of the unpaid loan balance is repayable in equal or graduated periodic installments over the remainder of the 6 year repayment period. The recipient is responsible for submitting certification of employment to the lending school in order to determine the interest rate applicable to the unpaid loan balance.

Installment payments must be made no less often than quarterly, in equal or graduated installments, in accordance with the terms of the schedule provided by the school and agreed to by the borrower.

5. Change of Name or Address

The borrower is required to inform the College of any change of name or address after ceasing to be a student of the College. The borrower must also inform the College of any change of name or address during the repayment period.

6. Prepayment

The borrower may, at his or her option and without penalty, prepay all or any part of the principle and accrued interest at any time. If an accelerated payment is made, that prepayment must first be applied to any accrued interest and then to the principle balance.

7. Combining NFLP Loans

When a borrower has more than one Nurse Faculty Loan outstanding, the sum of the amounts loaned may be combined for repayment purposes.

C. INTEREST

The NFLP loan bears interest on the unpaid balance at the rate of 3% per annum beginning 3 months after the borrower ceases to be a full-time student in the advanced nurse education program. Borrowers employed as fulltime nurse faculty at a school of nursing for a consecutive four-year period will bear interest at the rate of 3% for the four-year period and the remaining six years of repayment period.

If the College determines that the borrower will either fail to complete the course of study or fail to establish full time employment as faculty following graduation of the program, the loan will bear interest on the unpaid balance at the prevailing market rate.

The prevailing market rate is determined by the Treasury Department and is published quarterly in the Federal Register. The rates are fixed. Refer to HHS, Office of Finance web site at <http://www.hhs.gov/of/library/policy/debt/debtcoll.html> for information on the “consumer interest” rates

Important Note: The borrower is responsible for submitting verification of employment to the lending school in order to determine the interest rate application to the update loan balance.

D. LOAN CANCELLATION

An NFLP borrower will receive partial loan cancellation for each complete consecutive year of full-time employment as nurse faculty in a school of nursing. The College will cancel up to 85% of the loan:

- Upon completion by the borrower of each of the first, second, and third year of full-time employment, as required by the Promissory Note, as a faculty member in a school of nursing, the College will cancel 20% of the principle of and the interest on the amount of the loan unpaid on the first day of employment; and
- Upon completion by the borrower of the fourth year of full-time employment, as required by the Promissory Note, as a faculty member in a school of nursing, the College will cancel 25% of the principle of and the interest on the amount of the loan unpaid on the first day of employment.

1. Leave During Employment

Paid leave such as vacation or sick leave, which would normally be earned for one year's employment, does not constitute a break in employment.

A borrower who is on maternity leave of absence, as opposed to paid leave earned during the year of employment, cannot be considered to have worked a complete year and would thus not be entitled to cancellation for that particular year. However, paid maternity leave, regardless of duration, is not considered to be a break in service.

2. Changing Employment

A reasonable period of time to change from one place of employment to another does not constitute a break in service. A reasonable period of time is not more than 15 working days or 21 consecutive calendar days from the date the borrower's resignation is effective.

3. Request for Postponement of Installment Payments

When a borrower is employed full-time as a faculty at a school of nursing and will request partial cancellation of the loan at the end of each complete year of employment, the borrower may obtain a postponement of installment payments on the loan. The borrower must submit the initial Request for Postponement of Installment Payment form (EXHIBIT I) 30 days before the 9-month grace period ends. The borrower must submit the Request for Postponement of Installment Payment form for each period of cancellation and submit each subsequent form 30 days before the expiration date of the previous request for postponement. The form requires the borrower to:

- a) complete Part I;
- b) obtain certification by the employing agency, Part II; and
- c) forward the original and one copy to the school of nursing lender.

The school must notify the borrower of the approval of the Request for Postponement of Installment Payment and retain the form in the borrower's file. The school must maintain current loan accounts for the borrower documenting any periods of postponement of payments.

The borrower must notify the lending school of termination of full-time employment as faculty prior to completion of a year within 30 days after the last day of such employment, and the school must then place the borrower back into repayment with installment payment(s) payable to the school according to the borrower's repayment schedule.

4. Request for Cancellation Form

To obtain loan cancellation, the borrower must file the Request for Partial Cancellation of Loan form (EXHIBIT G) with the school of nursing which made the loan. The borrower must submit this form at the end of each complete year of full-time employment as faculty in a school of nursing. This form requires the borrower to:

- a) complete Part I;
- b) obtain certification by the employing agency to complete Part II; and
- c) forward the original and one copy to the lending school for cancellation of loan at the appropriate rate in lieu of payment.

The school will complete Part III indicating the amount of cancellation (principal and interest) and return a copy to the borrower as the receipt that it approved the loan cancellation.

E. REFUNDS

Refunds to borrowers for errors made by school must come from institutional funds, not the NFLP fund.

F. DEATH AND DISABILITY

1. Death

HHS will cancel the unpaid balance of the loan and accrued interest of a loan upon submission by the school of a death certificate or other official proof of death of the borrower. The school must submit documentation of death to the Division of Nursing (NFLP), Parklawn Building, Room 9-36, 5600 Fishers Lane, Rockville, Maryland 20857. The school retains the document in the borrower's file for audit purposes. The school must report the amount canceled on the Annual Operating Report.

2. Permanent and Total Disability

A borrower is entitled to cancellation of an NFLP loan in the event of permanent and total disability. Permanent and total disability is defined as being unable to engage in gainful employment of any kind because of a medically determinable impairment which is expected to continue for a long and indefinite period of time or to result in death. The Secretary of HHS or his designee will make this determination based on medical certification submitted by the borrower supporting the borrower's disability.

To claim cancellation for disability, a borrower must submit a formal request (**EXHIBIT H**) to the school that awarded the loan along with the following documentation:

- date entered and date graduated or date studies terminated;
- total amount of loans obtained;
- amount of unpaid balance;
- nature and date of onset of the disability;
- employment history prior to disability;
- statement of financial support; and
- current medical examination and/or treatment.

The medical report must be sufficiently detailed to provide for a comprehensive review to determine the nature, duration, and extent of the impairment and prognosis. Supporting documentation must include history of illness, medical examination(s), inpatient and outpatient treatments, and current medications. Include copies of all pertinent past medical records and a prognosis and rehabilitation plan. A signed and dated statement must accompany the medical documentation from the borrower's physician documenting permanent and total disability according to the definition above. The school must obtain from the borrower consent for release of information allowing the release of any required information on the disability to the HHS. The school will be formally notified of the Secretary's decision and must retain the written notification of the decision on file for audit and other review purposes. The school must report the amount of the loan canceled on its Annual Operating Report.

G. DEFERMENT

Borrowers who are ordered to active duty as a member of a uniformed service of the United States (Army, Navy, Marine Corps, Air Force, Coast Guard, the National Oceanic and Atmospheric Administration Corps, or the U.S. Public Health Service Commissioned Corps) are eligible for deferment for up to 3 years.

A borrower who voluntarily joins a uniformed service is **not** eligible for deferment, nor is a borrower who is employed by one of the uniformed services in a civilian capacity. For example, a borrower who is working for the Public Health Service (PHS) and who is not a member of the Commissioned Corps would not qualify for deferment.

The school may not put a borrower into deferment status unless the borrower submits a deferment request form (**EXHIBIT J**). Deferments are not automatic. Borrowers must file deferment forms for each period of deferment and request deferments at least 30 days before the beginning of:

- the activity that makes the borrower eligible for deferment; or
- the repayment period (i.e., the due date of the first payment) if the borrower is beginning the activity during the grace period.

Deferment periods are excluded from the 10-year repayment period. For example, a borrower who has used three years of deferments still has a total of 10 years--not 7 years--to repay the NFLP.

The borrower is responsible for informing the school of the end of the deferment period, and the school is responsible for placing the borrower back in repayment following the end of the deferment.

H. FORBEARANCE

A school may, based on its discretion, place a borrower's NFLP loan in forbearance when extraordinary circumstances such as poor health or hardships temporarily affect the borrower's ability to make scheduled loan repayments. Forbearance is limited to situations in which the borrower clearly intends to repay the NFLP loan obligation but is temporarily unable to comply with the existing repayment schedule.

During periods of forbearance, the borrower's obligation to make payments on interest and principal may be either reduced or eliminated. Interest on the loan continues to accrue but is not payable during this period.

A borrower must request forbearance by submitting a completed Request for Forbearance form (**EXHIBIT L**) to the school. The school must notify the borrower in writing of its approval or denial of the forbearance request and document that decision in the borrower's file.

Forbearance periods may be up to 6 months each. A school may grant a borrower no more than 2 forbearance periods without seeking the prior approval of HHS. Periods of forbearance are not excluded from the borrower's 10-year repayment period.

III. INSTITUTIONAL RESPONSIBILITIES IN REPAYMENT PROCESS

See [Fiscal Management, Collections, Chapter 2](#) for information on accounting requirements, debt collection requirements (e.g., due diligence), cash management requirements, program monitoring and audits.

1. Exit Interview

The school must conduct and document an exit interview with its borrowers (individually or in groups).

- Evidence that the borrower was reminded of his or her rights and responsibilities concerning the terms and conditions of the loan, and
- The borrower's current address, telephone number, and other information needed for loan collection. (See **EXHIBIT K**).

If a borrower fails to appear for an exit interview, the school must attempt to conduct the exit interview by mailing the exit interview information to the borrower and requesting that a copy of the repayment terms and the rights and responsibilities form or statement be signed and dated, the personal information form be completed and dated, and these items be returned to the school. If the borrower returns the information as requested, this will document that the exit interview was conducted.

EXHIBIT E

NURSE FACULTY LOAN PROGRAM (NFLP)

LOAN APPLICATION

(To be completed by the Borrower)

This form must be completed in its entirety and returned to the office of the Bursar before a NFLP loan is made.

WARNING: Any person who knowingly makes a false statement or misrepresentation in a NFLP transaction, bribes or attempts to bribe a Federal official, fraudulently obtains a NFLP loan or commits any other illegal action in connection with a Federal NFLP loan is subject to a fine or imprisonment under Federal statute.	
SECTION I	
1a. APPLICANT NAME (Last) (First) (M.I.)	2. SOCIAL SECURITY NUMBER (SSN)
1b. OTHER NAMES USED (Last) (First) (M.I.)	3. DATE OF BIRTH (Month/Day/Year)
4. CURRENT ADDRESS (Number, Street, Apartment Number, City, State, Zip Code)	5a. DAYTIME PHONE (Area Code/Number) ()
	5b. EVENING PHONE (Area Code/Number) ()
6. EMAIL ADDRESS	7. DRIVER'S LICENSE NUMBER AND STATE
8. DEGREE PROGRAM: _____ EXPECTED GRADUATION DATE: _____	9. EDUCATION LEVEL: <input type="checkbox"/> MASTER'S <input type="checkbox"/> DOCTORAL
10. PERSONAL REFERENCES -- Friend(s) and Relative(s)	
1) NAME _____ ADDRESS: _____ _____	
2) NAME _____ ADDRESS: _____ _____	
SECTION II	
11. ACKNOWLEDGEMENT	
I, the above named applicant, have been informed that I must agree to the service obligation associated with the Nurse Faculty Loan Program in order to be eligible to receive a loan under this program.	

THE ABOVE INFORMATION IS CORRECT AND COMPLETE AND I HEREBY AUTHORIZE VERIFICATION AS REQUIRED BY THE SCHOOL.

Printed Name _____ Signature _____

Date _____

EMPLOYMENT CERTIFICATION FORM

[*Applicant's Name*] entered into a contractual agreement with the [*Name of Lending School*] as a participant in the Nurse Faculty Loan Program (NFLP). This program requires the participant to be employed full-time as nurse faculty in a school of nursing for a complete year in order to receive cancellation of his/her loan. Please complete the Employment Certification Form at the bottom and return by (**mm-dd-yyyy**), to the following:

Mail to: [*Lending School Address*]; or

Fax to: [*Lending School Fax #*]

Keep a copy for your records.

PART I: TO BE COMPLETED BY LOAN RECIPIENT

Name: _____

Permanent Address: _____ Phone Number: _____

Place of Employment: _____

Address: _____

Beginning Date of Employment as Nurse Faculty: Month _____ Day _____ Year _____

Position Title: _____

I **CERTIFY** that I am employed full-time as Nurse Faculty in the above named School of Nursing, and all the information is true and correct to the best of my knowledge. If I change employment status, I will notify [*Name of Lending School*] immediately.

Signature: _____ Date: _____

PART II: TO BE COMPLETED BY EMPLOYER

I **CERTIFY** that the statements above concerning service of the above named NFLP loan recipient as a full-time nurse faculty are true and correct.

Name of Certifying Official: _____

Title: _____ Phone Number: _____ Fax Number: _____

Signature: _____ Date: _____

If the above named participant has **not** maintained faculty status during this period, please provide the date(s) and explanation for the change.

Date(s): _____

Explanation: _____

WARNING: ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT OR MISREPRESENTATION OF THIS FORM IS SUBJECT TO PENAL TIES WHICH MAY INCLUDE FINES AND IMPRISONMENT UNDER FEDERAL STATUTE.

EXHIBIT G

US DEPARTMENT OF HEALTH AND HUMAN SERVICES
 PUBLIC HEALTH SERVICE
 HEALTH RESOURCES AND SERVICES ADMINISTRATION
 BUREAU OF HEALTH PROFESSIONS
 5600 FISHERS LANE, PARKLAWN BUILDING
 ROCKVILLE, MARYLAND 20857

NFLP REQUEST FOR PARTIAL CANCELLATION

INSTRUCTIONS: A borrower under the Nurse Faculty Loan Program must submit this form to the school of nursing which made the loan in order to claim entitlement to loan cancellation for full-time nurse faculty employment pursuant to Section 846A of the Public Health Service Act, as amended by Public Law 107-205. The form must be submitted for each complete year of full-time nurse faculty employment in a school of nursing. It is the responsibility of the borrower seeking cancellation to (a) complete Part I, (b) obtain certification by the employing agency, Part II, and (c) forward the original and one copy to the lending school for cancellation of the loan at the appropriate rate in lieu of payment. The lending school will complete Part III, indicating the amount of cancellation earned (principal and interest), and return the copy to the borrower making such request.

NAME AND ADDRESS OF SCHOOL FROM WHICH LOAN WAS MADE <i>(Include Zip Code)</i>	NAME AND ADDRESS OF THE APPLICANT <i>(Include Zip Code)</i>
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PART I – Completed by Borrower

I hereby apply for a partial cancellation of my Nurse Faculty Loan in the appropriate amount of principal and interest, in accordance with Sections 846A of the Public Health Service Act, as amended by Public Law 107-205, for one year of employment as a full-time nurse faculty.

NAME AND ADDRESS OF EMPLOYING AGENCY <i>(Include Zip Code)</i>	PERIOD OF EMPLOYMENT	
	BEGINNING (Month, Day, Year)	END (Month, Day, Year)
	SIGNATURE OF APPLICANT	DATE

PART II – Certification by Employing Agency

I hereby certify that the above statements concerning full-time nurse faculty employment and the period of service are true and correct.

NAME OF APPLICANT	POSITION TITLE OF APPLICANT	
NAME AND ADDRESS OF EMPLOYING AGENCY <small>CHECK: <input type="checkbox"/> Public <input type="checkbox"/> Private for Profit <input type="checkbox"/> Private not for Profit</small>	SIGNATURE OF AUTHORIZED OFFICIAL	
	<table style="width: 100%;"> <tr> <td style="width: 70%; padding: 5px;">TITLE</td> <td style="width: 30%; padding: 5px;">DATE</td> </tr> </table>	TITLE
TITLE	DATE	

PART III – Partial Loan Cancellation (To be completed by Lending School)

The above named individual's loan account has been credited for partial cancellation for full-time employment as nurse faculty in accordance with the Section 846A of the Public Health Service Act, as amended, in the following amounts:

CANCELLATION RATE BY YEAR FOR EMPLOYMENT AS NURSE FACULTY: <input type="checkbox"/> 1st Year - 20% <input type="checkbox"/> 2nd Year - 20% <input type="checkbox"/> 3rd Year - 20% <input type="checkbox"/> 4th Year - 25%	CANCELLED		
	PRINCIPAL AMOUNT	INTEREST AMOUNT	
	SIGNATURE OF AUTHORIZING OFFICIAL – LENDING SCHOOL	<table style="width: 100%;"> <tr> <td style="width: 70%; padding: 5px;">TITLE</td> <td style="width: 30%; padding: 5px;">DATE</td> </tr> </table>	TITLE
TITLE	DATE		

DISABILITY CHECKLIST

NAME: _____ AGE: _____

DATE OF BIRTH: _____ CONSENT FOR RELEASE OF INFORMATION (Y/N): _____

DATE ENTERED SCHOOL: _____ DATE TERMINATED: _____

TOTAL AMOUNT OF LOANS OBTAINED (Including interest): _____

NUMBER OF CANCELLATIONS: _____ AMOUNT OF UNPAID BALANCE: _____

EMPLOYMENT PRIOR TO DISABILITY: _____

DIAGNOSIS: _____

DATE AND NATURE OF ONSET: _____

MEDICAL EXAMINATION, TREATMENTS, HISTORY OF ILLNESS, HOSPITALIZATIONS, INPATIENT AND OUTPATIENT TREATMENTS, MEDICATIONS (Include copies of all pertinent past medical records in addition to documentation of a CURRENT medical evaluation):

CURRENT MEDICATIONS: _____

PROGNOSIS: _____

REHABILITATION PLANS: _____

IS ANY TYPE OF GAINFUL EMPLOYMENT POSSIBLE? _____

NOTES:

EXHIBIT I

US DEPARTMENT OF HEALTH AND HUMAN SERVICES
 PUBLIC HEALTH SERVICE
 HEALTH RESOURCES AND SERVICES ADMINISTRATION
 BUREAU OF HEALTH PROFESSIONS
 5600 FISHERS LANE, PARKLAWN BUILDING
 ROCKVILLE, MARYLAND 20857

NFLP REQUEST FOR POSTPONEMENT OF INSTALLMENT PAYMENT

INSTRUCTIONS: A Nurse Faculty Loan may be postponed, in lieu of payment in accordance with the repayment schedule established by the school from which the loan was made, only if the borrower is employed full-time as a faculty at a school of nursing and expects to claim partial cancellation of his or her loan at the end of each complete year of such employment.

The borrower must submit two (2) copies of this form 30 days before the initial 9-month grace period. This form must be filed annually, in lieu of payment; subsequent requests for postponement of installment payment must be filed 30 days before the expiration date of the initial request for postponement each year of employment. It is the responsibility of the borrower seeking postponement of installment payment of loan to return this form properly executed to the school from which the loan was made.

IMPORTANT NOTE: Should you terminate full-time employment as nurse faculty prior to completion of a year, the installment repayment(s) is immediately due and payable to the lending school.

NAME AND ADDRESS OF SCHOOL FROM WHICH LOAN WAS MADE (Include Zip Code)	NAME AND ADDRESS OF BORROWER <i>(Include Zip Code)</i>
	DATE GRADUATED

PART I – CERTIFICATION OF EMPLOYMENT *(To be completed by Borrower)*

NAME AND ADDRESS OF EMPLOYER	TITLE OF POSITION	
	EMPLOYMENT START DATE (Month, Day, Year)	
	UNPAID LOAN BALANCE (PRINCIPAL/INTEREST)	DUE DATE

I certify that I am employed full-time as nurse faculty as indicated above and expect to complete one year of such employment on _____ (month-day-year), at which time I shall secure cancellation of a portion of my loan in accordance with the Section 846A of the Public Health Service Act, as amended by Public Law 107-205. I therefore request postponement of payment of repayment installment on the date due above.

SIGNATURE OF BORROWER	DATE
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PART II – CERTIFICATION OF EMPLOYMENT *(To be completed by Employer)*

I hereby certify that the above statements concerning service of the above-named borrower as full-time nurse faculty are true and correct.

NAME AND ADDRESS OF EMPLOYER	SIGNATURE OF AUTHORIZED OFFICIAL	
	TITLE	
	DATE	

CHECK: Public Private for Profit Private not for Profit

EXHIBIT J

US DEPARTMENT OF HEALTH AND HUMAN SERVICES
 PUBLIC HEALTH SERVICE
 HEALTH RESOURCES AND SERVICES ADMINISTRATION
 BUREAU OF HEALTH PROFESSIONS
 5600 FISHERS LANE, PARKLAWN BUILDING
 ROCKVILLE, MARYLAND 20857

NFLP CERTIFICATION OF DEFERMENT STATUS

INSTRUCTIONS: To request deferment of repayment on your Nurse Faculty Loan, two (2) copies of a Certification of Deferment Status form must be filed with the lending school at each of the following times: (1) when your first repayment installment is due, (2) annually thereafter as long as you are eligible for such deferment, and (3) when you cease to be in eligible deferment status. A copy of the form, properly executed, as submitted to the school, should be retained for your own records.

NOTE: Provisions governing deferment of Nurse Faculty Loan vary according to the date such loans were made; therefore, you should read the *Guide for repayment, deferment, and cancellation of Health Professions or Nursing Loans* for the specific provisions applicable to your loans before completing this form. The Guides are available from the school from which the loan was made.

NAME AND ADDRESS OF SCHOOL FROM WHICH LOAN WAS MADE

NAME AND ADDRESS OF BORROWER

PART I : REQUEST FOR DEFERMENT OF REPAYMENT -To be completed by borrower if he/she:

Performs active duty as a member of the uniformed service*.

This is to certify that I was in the _____ (Enter Name of Service)

from _____ to _____.

I further agree to notify the school from which I receive assistance immediately upon termination of my status as indicated above.

SIGNATURE OF BORROWER

DATE

PART II – CERTIFICATION OF DEFERMENT

To be completed by Commanding Officer and mailed to school from which the loan was made.

NAME AND ADDRESS OF UNIFORMED SERVICE HEADQUARTERS

SIGNATURE OF COMMANDING OFFICER

DATE

INSTITUTIONAL ACTION (School from which the loan was made)

Approved Disapproved

Reason for disapproval _____

SIGNATURE

DATE

* The uniformed services of the United States are the Army, Navy, Marine Corps, Air Force, Coast Guard, the National Oceanic and Atmospheric Administration Corps, and the U.S. Public Health Service Commissioned Corps.

EXIT INTERVIEW – Questionnaire

Date: _____

NFLP Participant Name: _____

Social Security Number: _____

Driver's License Number: _____ State: _____

Permanent Mailing Address:

Telephone Number: _____

Email Address: _____

Nearest Friend(s) or Relative(s) who will always know your address:

Telephone Number: _____

Name and Address of Employer (If known):

Telephone Number: _____

What are your future career plans?

For All Student Borrowers:

1. Do you know the full amount of the loan?
Yes _____ No _____
2. Have you been informed of your rights and responsibilities?
Yes _____ No _____
3. Do you understand the grace period and know when the first payment is due?
Yes _____ No _____
4. Have you been informed of the repayment options, postponement and cancellation provisions of the Nurse Faculty Loan program? Yes _____ No _____
5. Do you understand the accelerated payment option?
Yes _____ No _____
6. Do you understand that the collection officer must be informed of any change in his or her address?
Yes _____ No _____
7. Do you realize the importance of paying promptly or contacting the collection officer prior to the due date if payment cannot be made for any reason?
Yes _____ No _____

For Graduating Student Borrowers:

8. Do you understand the requirement to begin full-time employment as nurse faculty at a school of nursing to be eligible for postponement of loan? Yes _____ No _____
9. Do you understand that you must be employed full-time as a nurse faculty member for a complete year to be eligible for loan cancellation? Yes _____ No _____
10. Do you understand the REQUEST FOR POSTPONEMENT OF INSTALLMENT PAYMENT form?
Yes _____ No _____
11. Do you understand the REQUEST FOR PARTIAL CANCELLATION form? Yes _____ No _____

Student's Signature: _____ Date: _____

FORBEARANCE REQUEST FORM

Borrower Name:	Social Security Number:
Street Address, City/State/Zip:	
Original Loan Balance:	Present Loan Balance:

If poor health or your present financial situation makes paying your Nurse Faculty Loan Program (NFLP) loan a financial hardship, we may be able to grant you a forbearance of your NFLP loan. Principal payments are delayed during forbearance; however, interest will continue to accrue. You may pay the interest as it accrues or allow it to be added to your outstanding principal balance (capitalized) when the forbearance period ends. You must complete this entire form and show due financial hardship before we can grant you a forbearance of your loan. Read this form carefully before signing and return it by _____. When we receive your request, we will review it immediately and will notify you of our decision. You must continue making your regular monthly payments until your forbearance request is approved. **If YOU ARE PAST DUE ON YOUR PAYMENTS, IT IS ESPECIALLY IMPORTANT THAT YOU RETURN THIS FORM TO US SOON.** Collection activities will continue against you until we have received and approved this form: late notices will be sent, phone calls will be made, and, if your payments become seriously past due, the delinquency may be reported to a National credit bureaus.

If you are interested in requesting forbearance of your NFLP loan, please fill out this form completely and return it to us by _____. You must provide the reason for your financial hardship before we can grant a forbearance of your loan. You may contact us at _____ if you have any questions.

BORROWER FINANCIAL DATA

Employer Name	Address	City	State	Zip
_____	_____	_____	_____	_____
Years Employed	Net Monthly Salary	Other Income	Source of Other Income	
_____	_____	_____	_____	

Monthly Expenses:

RENT/MORTGAGE: _____ UTILITIES: _____ FOOD: _____ OTHER: _____

Creditor's Information:

Name of Creditor	City/State	Monthly Payment	Balance	Past Due Amount

REASON

Although I intend to repay my NFLP loan balance, I am temporarily unable to make payments because (state reason below):

AGREEMENT

I request a forbearance of my NFLP loan starting _____ and ending _____. Any outstanding accrued interest may be added to and become a part of the principal of the loan at the end of the forbearance period. The projected capitalized interest during the forbearance period is \$_____. I will resume monthly payments on _____. I will make payments of approximately \$_____ per month with payments due on the same day of each month as the day the first regular payment is due until the full unpaid principal amount of the loan is paid off. I understand that periodically I will be provided with an account statement listing the activity on the loan and the outstanding unpaid principal amount at the end such period.

(Signature of Borrower)

(Date)

FOR OFFICE USE ONLY:

_____ (lending School) believes, based upon the borrower’s statement above and/or other communications regarding forbearance recorded in the account record, that the borrower intends to repay the NFLP loan but is currently unable to make loan payments.

Do you understand that you must be employed full-time as a nurse faculty member for a complete year to be eligible for loan cancellation? Yes _____ No _____

Do you understand that you must be employed full-time as a nurse faculty member for a complete year to be eligible for loan cancellation? Yes _____ No _____

(Accepted by Authorized Official)

(Date)
