

## EXIT COUNSELING FORM

**Student Name** \_\_\_\_\_ **Student ID#:** \_\_\_\_\_  
LAST FIRST MIDDLE

Non- Campus E-mail address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_

### CURRENT ADDRESS

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### PERMANENT ADDRESS

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### NEXT OF KIN (CLOSEST RELATIVE)

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

### EMPLOYER (IF KNOWN)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### REFERENCE 1

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

### REFERENCE 2

Name \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

## RIGHTS & RESPONSIBILITIES

### I understand that I have the RIGHT to the following:

- Written information on loan obligations, including loan consolidation and information on my rights and responsibilities
- A copy of the promissory note and return of the note when the loan is paid in full
- Before repayment: information on interest rates, fees, the balance owed on loans, a loan repayment schedule, and an explanation of default and its consequences
- Notification, if I am in my grace period or repayment, no later than 45 days after the loan holder assigns, sells, or transfers my loan to another lender
- A grace period, if applicable, prepayment of the loan without penalty; and federal interest benefits, deferments and forbearances if I qualify

### I understand that I am REQUIRED to do the following:

- Repay the loan according to the repayment schedule and notify the loan holder of anything that affects my ability to repay or eligibility for deferment, or cancellation
- Notify the school and loan holder if I graduate, withdraw, drop below half-time, transfer to another school, or change my name, address, or Social Security number
- Notify the loan holder if I fail to enroll for the period covered by the loan
- Complete an online exit interview before leaving school

**I understand that counselors are available in the Financial Aid Office to answer any questions I may have about the loans.**

## CERTIFICATION & SIGNATURE

***I hereby certify that I have read the exit materials, and I understand that my student loans must be repaid. I understand that I have specific rights and responsibilities under the Direct Loan Program that are outlined above. I understand that this transmission certifies that I have met my obligation to participate in exit counseling as prescribed by federal statute.***

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

## ADDITIONAL INFORMATION / RESOURCES

If you need more information about your federal student loans, you can visit the National Student Loan Data System (NSLDS) at [www.nslds.ed.gov](http://www.nslds.ed.gov) or call them at **(800) 4 FED-AID**.

The Direct Loan website is <http://www.dl.ed.gov> or you can call them at **(800) 848-0979**.

The mailing address for general correspondence (not payments) is:

**Direct Loan Servicing Center**  
Borrower Services Department  
P.O. Box 5609  
Greenville, TX 75403-5609

The U.S. Department of Education offers the publication "Your Federal Student Loans: Learn the Basics and Manage Your Debt." The publication is located at <http://studentaid.ed.gov/students/attachments/siteresources/11-12YFSL.pdf>.

If during repayment you develop student loan problems that can't be resolved through the lender or guaranty agency, you might want to contact the U.S. Department of Education Federal Student Aid (FSA) Ombudsman. They will collect documentation and work to resolve the situation with you.

**Office of the Ombudsman**  
United States Department of Education  
4th Floor UCP-3/MS 5144  
830 First Street NE  
Washington DC 20202  
(877) 557-2575

[fsahelp.ed.gov](http://fsahelp.ed.gov) OR [ombudsman.ed.gov](http://ombudsman.ed.gov)