

Georgia College & State University
TEACHER CANCELLATION

Part I: To be completed by the Borrower

Name _____ SSN _____

Address _____

City _____ State _____ Zip _____

I hereby apply for cancellation of a portion of my Federal Perkins or National Direct student loan. I understand that the yearly principal cancellation rates are as follows for a maximum total of 100% after five years of eligible employment:

- Year one – 15%
- Year two – 15%
- Year three – 20%
- Year four – 20%
- Year five – 30%

I am a full-time teacher in a elementary or secondary school which has a high concentration of children from low-income families.

I taught a full year from _____ to _____.
(mm/dd/yyyy) (mm/dd/yyyy)

My daytime telephone number is _____ I taught grade _____.

I will also teach next year, grade _____.

Date _____ Signed _____

Part II: To be completed by the school Principal where employed

I hereby certify that the information stated by the borrower above is true and correct to the best of my knowledge. I further certify this school is/will be listed in the US Department of Education's "Directory of Designated Low-Income Schools" for the above year.

Name of School _____ *Affix seal or stamp*

City & State _____

County _____ Telephone _____

Date _____ Signed _____

Title _____