



2021-2022 Permanent Disability Documentation

Last Name	First Name	MI	MGA ID#
-----------	------------	----	---------

Your Student Aid Report (SAR) contained a message stating that you had a previous federal student loan discharged due to a total and permanent disability. We must collect a statement from your physician affirming that you are physically able to attend school and are able to obtain gainful employment in order to repay any future student loans.

In order to receive any additional financial aid, you must sign and date the following statement, attach your physician's statement, and return both to the Financial Aid Office.

By signing this statement, I acknowledge that any student loans I receive cannot be discharged in the future on the basis of any impairment present when the new loan is made, unless that impairment substantially deteriorates.

Student Signature

Date

YOU MUST ATTACH YOUR PHYSICIAN'S STATEMENT IF ONE HAS NOT BEEN PREVIOUSLY PROVIDED.

Please return this completed form to one of our Financial Aid Offices in Macon, Cochran, Dublin, Eastman, and Warner Robins, Georgia, email to financialaid@mga.edu OR fax to (478) 471-2790 (Macon), 478-934-3019 (Cochran, Dublin, Eastman), or 478-929-6787 (Warner Robins). If you have questions, please contact us 478-387-0580 or visit our website at www.mga.edu/financial-aid/index.php.