Loan Originations
PO Box 102405
Columbia, SC 29224

Repayment Services
PO Box 102423
Columbia, SC 29224

SOUTH CAROLINA
Student🍎Loan

8906 Two Notch Road • Columbia, SC 29223
www.scstudentloan.org • 800-347-2752 • 803-798-0916

SC Teachers Loan Programs Forgiveness Eligibility Confirmation Form
To be used for SC Teachers Loan, Career Changers, Governor's Teaching Scholarship, and PACE Loan program recipients.

SSN _____

Name _____

Address _____

City, State, Zip _____

_____

Phone_____

Subject: _____   School: _____

District: _____   *<u>Please Note</u>: The appropriate loan forgiveness will be made to your S.C. Teachers Loan once this form is received in our office.

TO BE COMPLETED BY DISTRICT PERSONNEL OFFICER OR DISTRICT SUPERINTENDENT

SECTION I: In order to certify this individual's eligibility for loan forgiveness, please certify the appropriate statement listed below: (Please Note: Teacher's Aides are not eligible and should not be certified.)

School year starting: _____ School year ending: _____

☐ The above named individual taught full-time at the school stated above: # of days taught:_____

☐ The above named individual did not teach on a full-time basis during the past school term.
The individual: ☐ taught part-time for a total of _____ days. (If less than full days, what portion?_____)
☐ substituted for a total of _____ days.

☐ The above named individual was not employed at the school stated above during the past school term.

Is the school named above public?   ☐ Yes   ☐ No

SECTION II: Has the named individual renewed his/her contract for the coming year?

If yes, please provide the information below.

• School: _____

• Subject: (Please DO NOT use codes) _____

If no, please give the date his/her last contract ended: _____

• Additional Comments: _____

SECTION III:

Signature: _____   Date: _____

Title: _____   Phone Number: _____

Address: _____

Please return to the repayment services address at top of page