

**NATIONAL DIRECT STUDENT LOAN / FEDERAL PERKINS LOAN
ELIGIBILITY DATA FORM FOR POSTPONEMENT AND CANCELLATION REQUESTS
FOR TEACHERS OF HANDICAPPED CHILDREN / SCHOOL PSYCHOLOGIST**

I. CERTIFICATION OF HANDICAPPED STUDENT POPULATION

A. This information pertains to the academic year _____ - _____.

B. Please indicate below the NUMBER of students you teach / counsel that fall into each category (use ONE category for multi-handicapped):

Mentally Retarded _____	Specific Learning Disabilities _____ (As defined per PL.94-142)
Hard of Hearing _____	Other Health Impaired _____ (Please specify other impairment)
Deaf _____	No. That do not fall into one of _____ The above categories.
Speech Impaired _____	
Visually Handicapped _____	
Seriously Emotionally Disturbed _____	TOTAL STUDENTS YOU TEACH / COUNSEL _____
Orthopedically Impaired _____	

II. CERTIFICATION OF JOB CONTENT

A. Are you professionally employed in classroom instruction or curricular-supportive activities?

YES _____ NO _____

If your job is, or is in part, curricular supportive, point out which duties you consider to be curricular supportive and indicate the percent (%) of time spent on these duties (this may be done on your job description).

B. Are you engaged PRIMARILY in providing direct and personal services to students?

YES _____ NO _____ (if some duties are not, please list them).

Are you licensed by the State? YES _____ NO _____

In what field? _____

III. CERTIFICATION OF AGES / PROGRAM

A. Indicate the chronological age range of the students you teach:

from _____ to _____ years of age.

B. If you are teaching children below the age of six, is your program (i.e. kindergarten / prekindergarten)

certified by your state as part of that state=s elementary education program? YES _____ NO _____

IV. CERTIFICATION OF INSTITUTION

If your institution is not part of a public or non-profit elementary or secondary school system, please respond to the following questions:

A. Is your institution eligible to contract with school districts to provide elementary or secondary (As defined by state law) education for handicapped children? YES _____ NO _____

B. Do you hold a valid certificate with a special education endorsement for purposes of teaching handicapped children? YES _____ NO _____

Borrowers Signature Date

Employer=s Signature Date