University of Illinois Springfield – Office of Financial Assistance
One University Plaza, MS UHB 1015 -- Springfield, Illinois 62703-5407 -- Phone: (217) 206-6724
https://www.uis.edu/financialaid/

2020-2021 Default/Overpayment Verification

For Priority Processing Submit Form by July 15, 2020

Section A – Student Information (Please print clearly)

Last Name	First Name	M.I.	Email

Street Address	City	State	Zip Code

What you should do:

1. Complete this entire worksheet. You must answer all the questions and the form must be SIGNED.
2. Submit an 8 ½ x 11 legible copy of documentation requested.
3. Please submit all documents to the address above or upload in self-service ***(please do not fax/email)***.
4. Please make sure to include your UIN on all documents.

The U.S. Department of Education's records indicate that you are in default on a federal student loan and/or received an overpayment of federal student aid funds. You are required by law to repay any funds received from the federal student aid programs to which you were not entitled. If your loan default or overpayment(s) have been resolved, please provide our office with any letters you may have received from the U.S. Department of Education confirming resolution.

Section B – Default/Overpayment Verification

Return this original form to our office along with a copy of the following requested documentation.

I have attached the following documentation ***(please check)***:

- ☐ Copy of proof from your loan agency showing that you have paid the loan in full.
- ☐ Copy of Satisfactory Repayment Arrangement from the loan agency, with proof of six consecutive, full, voluntary on time payments.
- ☐ Copy of the letter from the U.S. Department of Education that the overpayment has been resolved.

Section C – Student Signature

IMPORTANT: Return this original form to the Office of Financial Assistance. **All documentation submitted with this form must:**

1. **Clearly print UIN on every page of 8 ½ x 11 legible copies.**
2. **Include all appropriate signatures.**

I certify that the information provided on this form and any attachments are true and correct.

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Student Signature **Date**

ENTER YOUR 9-DIGIT **UIN** :

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