2024-2025 ACTIVE BANKRUPTCY FORM

Student's Name: Stud		Student's SSN or SCC ID #:	
This information is in regards to:	☐ Student Information	☐ Parent Information	
	n receive any additional federal stu	nat you have one or more student loans in an dent financial aid, you must provide the y, visit nslds.ed.gov.	
Please check the statement that any requested documentation		return this form to our office with	
☐ My current bankruptcy claim does request a discharge of any of my student loans. My loans are not of they are included in the bankrup proceedings for stay of collection	federal defaulted and tcy	r federal financial aid.	
☐ The Title IV debt included in the abankruptcy claim is a defaulted sor grant overpayment.	active Provide our office	with documentation from the holder of the the debt is dischargeable or has been	
☐ The Title IV debt included in the abankruptcy claim is a defaulted sor a grant overpayment that is N dischargeable or has NOT been defaulted.	tudent loan holder of the debi	financial aid and provide our office with the needed	
	-	rksheet is complete and correct. Warning: If may be fined, sentenced to jail, or both.	
Student's Signature		Date	
Parent's Signature (dependent stude	ents only)	Date	
Return this form with required docume	entation to:		
Southeastern Community College ATTN: Financial Aid 1500 W Agency Rd	Southeaster ATTN: Finand 335 Messen		

Keokuk IA 52632

West Burlington IA 52655