



Rehabilitation Repayment Agreement

Borrower Information

Name:		UIN/SSN:	
Address:		Cell Phone #:	
City, State, Zip:		Phone #:	
Name of Employer:		Work Phone #:	
Sources to Pay:		E-mail:	

Account Information

Account Number:	Original Due Date:	Balance: (thru _____)

Schedule of Payments for TRA

Agreed upon monthly payment amount:	
First Payment Due Date:	
Date of scheduled final (12th) payment:	

Terms of the Rehabilitation Repayment Agreement

This Repayment Agreement is a written agreement between the borrower and Texas A&M University in an attempt to successfully complete the requirements for rehabilitation as set by federal regulations governing Federal Perkins loans. The account will be closely monitored for payments.

Responsibilities of the Borrower

- The borrower must request rehabilitation
- The borrower must sign a rehabilitation agreement
- The borrower must make 12 on-time consecutive monthly payments, **payments are due by the 15th of each month**

Benefits of Rehabilitation (once successfully completed)

- Return to regular repayment status
- The first payment made under the 12 consecutive payments becomes the first payment under the new 10-year repayment period
- Removes the default from the borrower's credit history
- Rehabilitation re-establishes a borrower's eligibility for Title IV student financial assistance
- Removes all registration and transcript blocks

*I understand and agree to the above Schedule of Payments

*I understand that if a payment is not made in a timely manner, the amount I owe will become due in full immediately.

*I understand that I will remain **blocked from registration, transcripts and other University Services** until this loan is successfully rehabilitated or paid in full.

*I understand that to insure that I receive a monthly billing statement, I must notify the Student Debt Management Office (at the address or phone listed below) of any **address changes**. Furthermore, I understand that it is my responsibility to make monthly payments whether or not I receive a billing statement.

*I understand that this Temporary Repayment Agreement does not nullify the original terms of any promissory note (if debt is arising from a loan) I have signed. It is a renegotiated payment plan offered due to the fact that I did not honor the terms of my promissory note.

*I understand and agree to the terms of this Rehabilitation Repayment Agreement.

State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.

Signature: _____

Date: _____

Approved by: _____

Date: _____

Last revised: February 11, 2008

Physical address:
750 Agronomy Rd. Suite 2801
6001 TAMU
College Station, TX 77843-6001

Mailing address:
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