

Income-Based Repayment Plan Alternative Documentation of Income Federal Family Education Loan Program

OMB No. 1845-0102 Form Approved Exp. Date 04/30/2013

IBR ALT DOC

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents is subject to penalties that may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

SECTION	11: BURKUWER IDENTIFICATION				
		Please enter or correct the	following	j information.	
		SSN] - [
		Name			
0507/04	LO INOTOLIOTIONO AND INCODIMETION				
SECTION	1 2: INSTRUCTIONS AND INFORMATION				
Type or pringle		g this form, contact your loan holder. Return the completed fo	orm and an	y required documentation to the address sho	wn
plan and:		epay your eligible Federal Family Education Loan Program (F	,		
your with	spouse's current income, if you are married an this form;	as reported on your most recently filed federal income tax retur d file a joint federal income tax return); your loan holder will ma	ake this det	termination based on the information you provi	r de
on y	loan holder has requested that you provide alte our most recently filed federal income tax return al income tax return);	ernative documentation of income because your loan holder beli n, does not reasonably reflect your current income (and/or your	ieves that y r spouse's o	our adjusted gross income (AGI), as reported current income, if you are married and file a joi	nt
` '		Internal Revenue Service (IRS) is unable to provide your loan he required to file a federal income tax return for the most recently		•	
The amour	nt of your monthly payment under the IBR plan	is based on your current income (and your spouse's current inc	come, if you	u are married and file a joint federal income tax	(
return) and form, inclu Section 5.	l is reevaluated annually. To submit alternative of ding your signature in Section 5, and return it t	documentation of your income, you must attach documentation o the address shown in Section 6. If you are married and file a j	of that inc joint federa	come as described in Section 4, complete this all income tax return, your spouse must also sig	n in
SECTIO	N 3: SPOUSE INFORMATION (IF YOU ARE	MARRIED AND FILE A JOINT FEDERAL INCOME TAX F	RETURN)		
Name					
	Last	First		Middle Initial	
Address _					
	Number and Street	City	State	Zip Code	
SECTION	I 4: INCOME INFORMATION (MUST BE CO	MPLETED BY THE BORROWER AND SPOUSE, IF MARRIL	ED AND FI	ILE A JOINT FEDERAL INCOME TAX RETU	RN)
interest ind	provide your total annual taxable income from a come, tips, alimony). If you are married and file applemental Security Income, child support, o	Ill sources that you currently receive (for example, income from a joint federal income tax return, you must also provide your sp	employme pouse's anr	ent, unemployment income, dividend income, nual taxable income. Do not report untaxed inc	ome
You must printerest or	provide supporting documentation for all incombank statements, dividend statements), or, if the	lee (yours and your spouse's) reported in this section (for examplese forms of documentation are unavailable, a signed statemen documentation you provide must be no older than 90 days from	nt explaining	g the income source(s) and giving the name an	id
Your eligib	ility for the IBR plan and your payment amount	will be determined based on your annual income as supported	by the doc	umentation you provide.	
☐ Check	this box if you do not have any income or rece	eive only untaxed income such as Supplemental Security Incom	e, child sup	pport, or federal or state public assistance.	
	this box if you are married and file a joint fede ity Income, child support, or federal or state pu	ral income tax return and your spouse does not have any incom iblic assistance.	ne or receiv	es only untaxed income such as Supplemental	
	he items below by entering your annual taxable	,			
	•	(as supported by the documentation you provide)			
Your spous	se's annual taxable income, if you are married a	nd file a joint federal income tax return: \$	(as s	supported by the documentation you provide)	
	N 5: AUTHORIZATION, UNDERSTANDING BE COMPLETED BY THE BORROWER AND	S, CERTIFICATION AND SIGNATURE D SPOUSE, IF MARRIED AND FILE A JOINT FEDERAL IN	NCOME TA	AX RETURN)	
		0.5			_
repaym		.S. Department of Education, and their respective agents and co number that I provide for my cellular telephone or other wireless			
a joint f	ederal income tax return with my spouse, my s	ested from the IRS even if alternative documentation of my inco pouse's income information, documentation, and signature are e for the purpose of determining my monthly payment amount	required. I	understand I must agree to provide to the loar	
	•	his form and in any accompanying documentation is true, comp		•	
Borrower S	Signature		Date (mm	n-dd-yyyy)	
Spouse Si	gnature (if required)		Date (mm	n-dd-yyyy)	
-	* * *		,	· = *	

SECTION 6: WHERE TO SEND THE COMPLETED IBR PLAN ALTERNATIVE DOCUMENTATION OF INCOME FORM

Return the completed IBR Plan Alternative Documentation of Income form and any required documentation to: (If no address is shown, return to your loan holder.)

VERMONT STUDENT ASSISTANCE CORPORATION PO BOX 999 WINOOSKI, VT 05404-0999 If you need help completing this form, call: (If no telephone number is shown, call your loan holder.)

Toll-Free 1-800-798-8722 Local (802) 655-4050

SECTION 7: IMPORTANT NOTICES

Privacy Act Notice

The Privacy Act of 1974 (5 U.S.C. 552a) requires that the following notice be provided to you:

The authority for collecting the requested information from and about you is §428(b)(2)(A) et seq. of the Higher Education Act (HEA) of 1965, as amended (20 U.S.C. 1078(b)(2)(A) et seq.) and the authorities for collecting and using your Social Security Number (SSN) are §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) and 31 U.S.C. 7701(b). Participating in the Federal Family Education Loan (FFEL) Program and giving us your SSN are voluntary, but you must provide the requested information, including your SSN, to participate.

The principal purposes for collecting the information on this form, including your SSN, are to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan (such as a deferment, forbearance, discharge, or forgiveness) under the FFEL Program, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect and report on your loan(s) if your loan(s) become delinquent or in default. We also use your SSN as an account identifier and to permit you to access your account information electronically. The information in your file may be disclosed, on a case-by-case basis or under a computer matching program, to third parties as authorized under routine uses in the appropriate systems of records notices. The routine uses of this information include, but are not limited to, its disclosure to federal, state, or local agencies, to private parties such as relatives, present and former employers, business and personal associates, to consumer reporting agencies, to financial and educational institutions, and to guaranty agencies in order to verify your identity, to determine your eligibility to receive a loan or a benefit on a loan, to permit the servicing or collection of your loan(s), to enforce the terms of the loan(s), to investigate possible fraud and to verify compliance with federal student financial aid program regulations, or to locate you if you become delinquent in your loan payments or if you default. To provide default rate calculations, disclosures may be made to guaranty agencies, to financial and educational institutions, or to state agencies. To provide a standardized method for educational institutions efficiently to submit student enrollment status, disclosures may be made to guaranty agencies. To forovide a standardized method for educational institutions efficiently to submit student enrollment status, disclosures may be made to guaranty agencies. To forovide a standardized method for educational institutions efficiently to submit student e

In the event of litigation, we may send records to the Department of Justice, a court, adjudicative body, counsel, party, or witness if the disclosure is relevant and necessary to the litigation. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for action. We may send information to members of Congress if you ask them to help you with federal student aid questions. In circumstances involving employment complaints, grievances, or disciplinary actions, we may disclose relevant records to adjudicate or investigate the issues. If provided for by a collective bargaining agreement, we may disclose records to a labor organization recognized under 5 U.S.C. Chapter 71. Disclosures may be made to our contractors for the purpose of performing any programmatic function that requires disclosure of records. Before making any such disclosure, we will require the contractor to maintain Privacy Act safeguards. Disclosures may also be made to qualified researchers under Privacy Act safeguards.

Paperwork Reduction Notice

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0102. The time required to complete this information collection is estimated to average one hour (60 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:

U.S. Department of Education, Washington, DC 20202-4651

If you have any comments or concerns regarding the status of your individual submission of this form, write directly to the address shown in Section 6.