



## Mid-Continent University Loan (Discharge) Application School Closure

*Before responding, carefully read the entire form, including instructions and other information on the following page. Any person who knowingly makes a false statement or misrepresentation on this form or any accompanying documents may be subject to penalties.*

### Section I. Borrower Identification

1. Borrower Social Security Number: \_\_\_\_\_
2. Borrower Name: \_\_\_\_\_
3. Borrow Address: \_\_\_\_\_
4. Borrower Phone: \_\_\_\_\_
5. Borrower Email: \_\_\_\_\_

### Section II. Student Information

1. Student's Name (last, first, middle): \_\_\_\_\_
2. Student's SSN: \_\_\_\_\_
3. Closed School's Name: **MID CONTINENT UNIVERSITY**
4. Closed School's Address: **99 EAST POWELL ROAD MAYFIELD, KY 42066**
5. Date School Closed: **JUNE 30, 2014**
6. Dates of Attendance at the Closed School (format mm/dd/yyyy): From \_\_\_\_\_ To \_\_\_\_\_
7. Name of the program of study that you were enrolled in at the time the school closed:  
\_\_\_\_\_
8. Did you complete the program of study at the closed school? (Yes or No)  
If No, check all that apply:  
 The school closed while you were still enrolled.  
 You withdrew from the school.  
If Yes, what was your date of withdrawal (format mm/dd/yyyy)?: \_\_\_\_\_  
 You were on an approved Leave of Absence when the school closed.  
If Yes, include dates of Leave of Absence here (format mm/dd/yyyy):  
From: \_\_\_\_\_ To: \_\_\_\_\_  
 Other (please explain): \_\_\_\_\_
9. Were you able to complete your program of study, or a comparable program of study at another school? (Yes or No)
10. Are you in the process of completing your program of study, or a comparable program of study at another school? (Yes or No)
11. Did the other school give you credit for training received at the closed school by allowing transfer of credits or hours earned at the closed school, or by any other means? (Yes or No)
12. Were you required to start the program of study over from the beginning at another school? (Yes or No)
13. Did the holder of your loan receive any money back (a refund) from the school on your behalf? (Yes, No, or Don't Know)  
If yes, give the amount and explain why money was refunded:  
\_\_\_\_\_
14. Did you make any monetary claim with, or receive any payment from, the school or any third party in connection with enrollment or attendance at the school? (Yes, No, or Don't Know)

If Yes, please provide the name, phone number, and address of the party with whom the claim was made or from whom payment was received as well as the amount/ status of claim and/or amount of payment received: \_\_\_\_\_

**Section III. Borrower Certification**

My signature certifies I have read the terms and conditions that apply to this loan and agree. Under penalty of perjury, I certify that all of the information on this form is true and accurate to the best of my knowledge.

Borrower's Signature x \_\_\_\_\_

**Section IV. Definitions**

The **date the school closed** is the date that the school stopped providing educational instruction in all programs, as determined by the U.S. Department of Education.

The **holder** may be the lender, guarantor, or the Department.

**Program of Study** means the instructional program leading to a degree or certificate in which you were enrolled.

**Third Party** refers to any entity that may provide reimbursement for a refund owed by the school.

**Section V. Terms and Conditions:**

I received loan funds from Mid Continent University, the closed school, either (1) directly, or (2) in the form of a credit applied to the amount owed to the school. I was enrolled at the school, or on an approved leave of absence on the date that it closed, or withdrew from the school not more than 120 days before it closed. The 120 day period may be extended under exceptional circumstances related to the school's closure.

I agree to cooperate with Mid Continent University regarding any enforcement actions related to my request.

**Section VI. Notices:**

We are required to turn your attention to the Privacy Act of 1974 . The principal purposes for collecting the information on this form are to verify your identity, and if it becomes necessary, to locate you and collect on your loan(s) due to default or delinquency.

The information in your file may be disclosed to third parties as authorized under routine uses in the appropriate systems of records.

In the event of litigation or potential violation of law, we may send records to the appropriate authorities

**Section VII. Where to send your application:**

Send the completed application to: **MID-CONTINENT UNIVERSITY 99 EAST POWELL ROAD MAYFIELD, KY 42066 OR CALL 270-251-8900 FOR ANSWERS TO ANY LOAN RELATED QUESTIONS YOU MAY HAVE.**

***LOAN APPLICATION DETAILS ATTRIBUTED TO THE U.S. DEPARTMENT OF EDUCATION LOAN DISCHARGE APPLICATION SCHOOL CLOSURE OMB NO. 1845-0015.***