Law Enforcement or Corrections Officer Addendum Part 1-To Be Completed By Borrower

Borrower Name (Last, Fir	st, Initial):		Account Number:	Social Security Number:	
Address:	City:	State:	Zip:	Telephone Number:	

Part 2 - To Be Completed By Employer

The borrower indicated above has applied for a cancellation of their student loan based on their employment as a law enforcement or corrections officer. In order for a cancellation request to be honored, the employer must respond to the following questionnaire.

	Yes	No
1 Is the above referenced borrower employed with your agency?		
2 Is borrower a full-time employee?		
3 Please indicate date borrower completed their basic training program:		
4 Please indicate date borrower passed the Law Enforcement Certification Exam:		
5 Borrower's full-time employment start date: end date (if applicable):		
6 Please indicate borrower's job title:		
7 Is your agency a local, state, or federal agency?		
8 Is your agency publicly funded?		
Please note: Please respond to question # 9 OR # 10, NOT both		
9 Do your agency's activities pertain to crime prevention, control, or reduction, or to the enforce-		
ment of criminal law?		
Please note: Such activities include, but are not limited to, police efforts to prevent, control,		
or reduce crime or to apprehend criminals; activities of courts and related agencies having		
criminal jurisdiction; activities of corrections, probation, or parole authorities; and problems		
relating to the prevention, control, or reduction of juvenile delinquency or narcotic addiction.		
10 Is your agency primarily responsible for enforcement of civil, regulatory, or administrative law?		
11 Is borrower's position essential to the agency's primary mission?		
Please note: For the borrower's position to be considered essential to the agency's primary		
mission, he or she must be a full-time employee of an eligible agency and a sworn officer or		
person whose principal responsibilities are unique to the criminal justice system and are		
essential in the performance of the agency's primary mission. The agency must be able to		
document the employee's functions. Please see question 13.		
12 Are borrower's official responsibilities supportive, such as those that involve typing, filing,		
accounting, office procedures, purchasing, stock control, food service, transportation,		
or building, equipment or grounds maintenance?		
13 A copy of the borrower's job description must accompany this form. Is a job description enclosed?		

I certify that the information stated above is true and correct.

Certifying Organization:	Signature of Authorize	Signature of Authorized Official:	
Telephone No:			
Address:	Title:	Date Signed:	
City:			
State: Zip:	Form may be faxed to: (517) 353-9640	Please return to: Loans Receivable Hannah Administration Building 426 Auditorium Rd Rm 360 (LR) East Lansing, MI 48824-2602	