



Exit Interview Form ISAC-Guaranteed FFELP Loans Student Borrower Information

1755 Lake Cook Road
Deerfield, IL 60015-5209
800.899.ISAC (4722)
Web site: collegezone@isac.org
E-mail: collegezone@isac.org

Social Security No.	Last Name	First Name	MI
Date of Birth	Driver's License No.	State	Lender/Holder Name
Borrower's Expected Permanent Address			
Street Address		Area Code and Telephone No.	
City	State	ZIP Code	e-Mail Address
Borrower's Expected Employer (if unknown, write unknown)			
Name of Employer		Area Code and Telephone No.	
Street Address			
City		State	ZIP Code
Borrower's Closest Living Relative			
Last Name	First Name	MI	Relationship
Street Address		Area Code and Telephone No.	
City		State	ZIP Code
Borrower's Personal References (3 required) – Relatives and/or Employed Adults			
Name		Relationship	Area Code and Telephone No.
Street Address	City	State	ZIP Code
Employer			
Name		Relationship	Area Code and Telephone No.
Street Address	City	State	ZIP Code
Employer			
Name		Relationship	Area Code and Telephone No.
Street Address	City	State	ZIP Code
Employer			

College Instructions: The information provided above by the student must be furnished to ISAC within 60 days after receipt from the student. Copies of this form should be retained for the college's records and provided to the student.

Exit Interview Certification

I certify that I have received loan counseling information. Information was provided about the student loans that I borrowed to attend college. This information included: typical repayment tables, alternative payment options, deferment information, debt management information, availability of the Student Loan Ombudsman's office, and consequences of defaulting on a loan.

I further certify that I understand it is my responsibility to maintain contact with my lending institution or the subsequent holder of the loan(s). I will notify them of any change in my name, address, telephone number and student status. I will also contact my lender/holder to arrange for any possible deferments and/or forbearance.

Student Signature

Date

College Name

ED School Code