



William D. Ford Federal Direct Loan Program

**William D. Ford Federal Direct Loan Program  
Income Contingent Repayment Plan  
Consent to Disclosure of Tax Information**

OMB No. 1845-0017  
Form Approved  
Exp. Date 01/31/2006

I (We) authorize the Internal Revenue Service (IRS) to disclose certain tax return information (for the tax years listed below) which includes my (our) name(s), address(es), Social Security Number(s), filing status, tax year, and Adjusted Gross Income(s). This information will be disclosed to the U.S. Department of Education (ED) and the William D. Ford Federal Direct Loan (Direct Loan) Program contractors and subcontractors for the sole purpose of determining the appropriate income contingent repayment amount on the Direct Loan Program loan(s) that is subject to income contingent repayment. ED's Direct Loan Program contractors and subcontractors may change. You may obtain the names of the current Direct Loan Program contractors and subcontractors by writing to ED at the address shown at the bottom of this page.

**Request for Tax Years: 2001, 2002, 2003, 2004, and 2005.**

***See the back of this form for instructions.***

(1) Borrower's (Taxpayer's) Name Printed ***as it appears on tax returns***

(2) Borrower's (Taxpayer's) Social Security Number

(3) Borrower's (Taxpayer's) Signature  
***Signature is valid for 60 days – see instructions on the back of the form.***

\_\_\_\_-\_\_\_\_-\_\_\_\_ (MM-DD-YYYY)  
Date form was signed

***PLEASE NOTE: If you are married, your spouse is required to complete the following:***

(4) Spouse's (Taxpayer's) Name Printed ***as it appears on tax returns***

(5) Spouse's (Taxpayer's) Social Security Number

(6) Spouse's (Taxpayer's) Signature  
***Signature is valid for 60 days – see instructions on the back of the form.***

\_\_\_\_-\_\_\_\_-\_\_\_\_ (MM-DD-YYYY)  
Date form was signed

**Return this form to:** U.S. Department of Education  
Consolidation Department  
Loan Origination Center  
P.O. Box 242800  
Louisville, KY 40224-2800

## William D. Ford Federal Direct Loan Program Income Contingent Repayment Plan – Consent to Disclosure of Tax Information

**Borrower Instructions:** To be considered for the Income Contingent Repayment Plan, you and/or your spouse must complete the Consent to Disclosure of Tax Information on the front of this form. Please complete the form using the following instructions:

- Item 1.** Print (or type) your name as it appears on your tax returns.
- Item 2.** Print (or type) your Social Security Number.
- Item 3.** Sign and date the form in blue or black ink only. Report the date as month-day-year (MM-DD-YYYY).

**Items 4-6 must be completed if you are married.**

- Item 4.** If you are married, print (or type) your spouse's name as it appears on tax returns.
- Item 5.** If you completed Item 4, print (or type) your spouse's Social Security Number.
- Item 6.** If you completed Items 4 and 5, have your spouse sign and date the form in blue or black ink only. Report the date as month-day-year (MM-DD-YYYY).

Send this form to the U.S. Department of Education (ED) at the address shown on the front. **DO NOT SEND THIS FORM TO THE INTERNAL REVENUE SERVICE (IRS).** Once your application to participate in the Income Contingent Repayment Plan has been approved, ED will forward this form to the IRS. ***Because the IRS will not accept this form if more than 60 days have passed since you and/or your spouse signed the form, it is important that you return the completed form to ED promptly.***

**Request to Revoke Tax Information Authorization:** You and/or your spouse may revoke the Consent to Disclosure of Tax Information at any time. To revoke consent, send a copy of the original authorization with the word “**REVOKE**” across the top directly to the IRS at the address given below. (If the revocation is sent to ED, there will be a delay before the revocation becomes effective.) The revocation must be signed by the taxpayer(s) who signed the original Consent to Disclosure of Tax Information. If you and/or your spouse do not have a copy of the original form, a statement of revocation is acceptable. The statement must indicate that the authority to disclose tax information to the Direct Loan Program is revoked, and must be signed by the taxpayer(s) who signed the original authorization form.

**NOTE:** If you and/or your spouse revoke(s) the Consent to Disclosure of Tax Information, you and/or your spouse become(s) ineligible for income contingent repayment, and you and/or your spouse must contact the Direct Loan Servicing Center to select another repayment option. If you and/or your spouse fail(s) to contact the Direct Loan Servicing Center, ED will assign you and/or your spouse to the Standard Repayment Plan.

**Revocation Address:**  
IRS  
P.O. Box 400  
Stop 125  
Holtsville, NY 11742

### **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 §451 et seq. of the Higher Education Act of 1965, as amended (20 U.S.C. 1087a et seq.) and the authority for collecting and using your Social Security Number (SSN) is §484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)). Participating in the William D. Ford Federal Direct Loan (Direct Loan) 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 Direct Loan Program, to permit the servicing of your loan(s), and, if it becomes necessary, to locate you and to collect 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 to third parties as authorized under routine uses in the appropriate systems of records. The routine uses of this information include its disclosure to federal, state, or local agencies, to other federal agencies under computer matching programs, to agencies that we authorize to assist us in administering our loan programs, to private parties such as relatives, present and former employers, business and personal associates, to credit bureau organizations, to financial and educational institutions, to guaranty agencies, and to contractors 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 counsel you in repayment efforts, 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, to provide financial aid history information, to assist program administrators with tracking refunds and cancellations, or to provide a standardized method for educational institutions efficiently to submit student enrollment status.

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 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 1845-0017. The time required to complete this information collection is estimated to average 0.2 hours (12 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:**

U.S. Department of Education  
Consolidation Department  
Loan Origination Center  
P.O. Box 242800  
Louisville, KY 40224-2800