MARYLAND LOAN ASSISTANCE REPAYMENT PROGRAMS AND HI **Lender Verification Form** Maryland Higher Education Commission Office of Student Financial Assistance 217 E Redwood Street Baltimore, MD. 21202 (410)767-3300 TTY for the Deaf - (800) 735-2258 www.mhec.maryland.gov careerbased.mhec@maryland.gov Section A - Release (To be completed by the applicant) Select the program applying for: MLARP Foster Maryland Dent Care Janet L Hoffman MLARP Police and Probation MHEC ID Number: Last Four SSN: Date of Birth: First Name: Last Name: _____ M.I.: _____ Address: State: Zip code: City: I authorize my lender , to provide the loan information requested by the Office of Student Financial Assistance. I certify that the information given is true and complete to the best of my knowledge. Applicant's signature Date Section B - Loan Information (To be completed by the lender) Type of Loan Account number Outstanding balance Current 🌔 In default 🌔 In deferment 🌔 Grace Period 🕑 Forbearance This loan is: Federal I.D. number of lender or servicer Name of lender or servicer Address of lender or servicer City State Zip code I certify that the information provided above is true and complete to the best of my knowledge. Signature of official Date Title of official Printed name of official Telephone number: E-mail: Submit this form and all required documents to MHEC by SECURE UPLOAD online through your MDCAPS account. Once logged in select "Electronic File Upload" from the homepage then follow the

prompts. Under provisions of the Americans with Disabilities Act, the material is available in alternate formats. Please call (410) 767-3124, (800) 974-0203, or (800) 735-2258 (TTY /Voice)

Note: This form must be used for each of your loans. Make as many copies as necessary.