

Income-Based Repayment Self-Certification



We are requesting that you complete this form in order to verify your eligibility for Income-Based Repayment (IBR). Please indicate which condition below applies to you by checking the appropriate box and attaching the documentation requested.

☐

"I am newly self-employed as of the following date: _____."

List your projected monthly gross income: \$_____. Attach documentation of your newly formed business and proof of your involvement in that business. (Examples include business registration, licensure, and Federal Tax ID documentation, copy of signed letter to federal or state entity on business letterhead.)

☐

"I cannot provide current documentation of my taxable income."

Complete Employment Information:

Name of Employer: _____

Address of Employer: _____

Hourly Pay: _____

Frequency of Pay: _____

Please write your self-certifying statement on the lines below:

"By signing and dating this form, I am certifying that all of the information I have provided above is complete and true."



Signature

Date

Account Number/SSN