UNIVERSITY OF CALIFORNIA

CALIFORNIA DREAM LOAN REHABILITATION REQUEST FORM

Return completed form in person or via email to the institution where you borrowed the CA DREAM Loan. Rehabilitation is a one-time option for borrowers whose loan has gone into default as defined in the promissory note. Amounts owed obtained by a collection agency or through the state offset program do not count towards rehabilitation requirements. Rehabilitation provides a number of benefits:

- Allows you to obtain a positive update to your credit bureaus if you have a credit history.
- Ends contact from collection agencies while it remains in good standing, in a "current" status.
- Restores ability to obtain official academic transcripts and utilize other institutional services.
- Enables you to request a deferment or forbearance as before, if necessary.

SECTION A: BORROWER INFORMATION			
Last Name		First Name	
Student ID#		SSN or (DREAM App ID if no SSN available)	
Hom	ne Address		
Cell	Phone	E-mail	
SECTION B: BORROWER REQUIREMENTS, MUST CHECK ALL BOXES TO BE CONSIDERED			
	As a sign of good faith, I have paid all late charges and past due amounts.		
	Additionally, I have made six consecutive monthly payments within fifteen days of the due date.		
	I am able and willing to make monthly payments up to 15% of my discretionary income (but at least \$50 per month), and that this is enough to pay the regularly scheduled payment due each month. [Discretionary income is the difference between your income and a selected percent of the poverty guideline for your family size and state of residence.]		
	I am working full-time and I am attaching documentation of my monthly income, and my family size (including myself and dependents including unborn children) is; and this is more than 150% of the poverty guideline for my family size using the table found at https://aspe.hhs.gov/poverty-guidelines		
	I understand that I most obtain approval for Rehabilitation and my account must subsequently appear in a Current status before I can request any Deferments or Forbearances.		
SECTION C: UNDERSTANDING AND SIGNATURE			
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I certify, to the best of my knowledge, that all information in this form is accurate. I understand that my rehabilitation will begin as certified by the Lender. I authorize the Lender and its agents to contact me for additional information regarding this request using any contact information it has on file. I will monitor my account to ensure I stay informed of the status of my loan.			
Borrower's Signature Date			