



FRESH START INITIATIVE ACKNOWLEDGMENT FORM

FINANCIAL AID OFFICE

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Morrilton, AR 72110

(501) 977-2055
1-800-264-1094
Fax: (501) 977-2123

www.uaccm.edu

I, (Print student name), understand that I am eligible for Title IV aid as a result of the Fresh Start initiative. As a Fresh Start-eligible borrower, I understand that, by accepting Title IV HEA federal student aid during the Fresh Start period, I am agreeing to have my defaulted loans transferred to a new loan servicer – the company that will manage my loan - which will result in continued Title IV, HEA federal student aid eligibility beyond the Fresh Start period. I understand that this transfer may not occur immediately and that I can contact the holder(s) of my defaulted loan(s) to request transfer sooner.”

Social Security No. or Student ID No.: _____
(Student)

Signature: _____ **Date:** _____
(Student)