

REQUESTOR INFORMATION

Name: _____

Phone: _____

Email: _____

UW System EMPLID (if known): _____ (Your System EMPLID is an
8-digit number that starts with 0.)**CHECKLIST****Print the Public Service Loan Forgiveness form provided by the Dept of Education.**Complete Sections 1 & 2 on page 1 (UW-Shared Services will complete/verify
information on Page 2 in Sections 3 & 4). Confirm that you've signed and dated Page 1.**Let us know how to proceed. Select one.**

- I would like UW-Shared Services to fax my PSLF form to the Department of Education FedLoan Servicing and send me a copy (provide personal mailing address or fax number to send your copy to). **We CANNOT send PSLF forms via email.**

Date UW-Shared Services sent to the Department of Education: _____

- I would like to send my PSFL form to the Department of Education directly. Please send me original (provide personal mailing address or fax number).

Send us your request.

Fax pages 1 & 2 of the PSLF along with this cover sheet to 608-890-2327 or mail it to UW-Shared Services Verifications, 660 West Washington Ave, Suite 201, Madison, WI 53703.

Any questions regarding your qualifying payments should be directed to FedLoan Servicing at 1-855-265-4038.

**** ELECTRONIC SUBMISSIONS WILL NOT BE ACCEPTED. ******NOTES**