



State of New Jersey Nursing Faculty Loan Redemption Program

HESAA-SPECIAL LOAN UNIT
PO Box 549
Trenton, NJ 08625-0549

www.hesaa.org 800-792-8670

Application

Personal Information <i>Please print in dark ink</i>			
First Name	MI	Last Name	Social Security Number
Date of Birth			
Street Address		State of Legal Residence	
Home Phone			
City	State	Zip Code	Email Address
Employment Information			
Name of Educational Institution where employed		Job Title	
Street Address		Full-time Employment Start Date	
City	State	Zip Code	Telephone
College Attended <i>Attach a copy of (unofficial) transcripts that includes graduation date, GPA and degree awarded</i>			
Name of College			Graduation Date
Type of Degree Awarded		Degree Major	
Student Loan Information <i>Attach most recent billing statements from each lender/servicer. (Only Student loan indebtedness associated with the approved graduate degree program will only be considered.)</i>			
Lender Name	Amount Owed	Address where payments are sent	
Lender Name	Amount Owed	Address where payments are sent	
NJCLASS Loan Balance: \$ _____			
Certification and Authorization			
<p>I certify that the information on this application is true, correct and complete to the best of my knowledge and belief and made in good faith. I certify that I do not owe a refund on a Federal or State student assistance grant and that I am not in default on a Federal or State student loan. I understand that the Higher Education Student Assistance Authority ("HESAA" or "you") and your agents are relying on this certification.</p> <p>I authorize you to obtain verification of my eligibility status, including information related to my employment, college transcripts, and student loan debt. In addition, I agree to comply with all applicable laws, rules, regulations, policies, and directives of the Nursing Faculty Loan Redemption Program. I also understand that I must remain employed as a faculty employee at an eligible institution on a full-time basis during my participation in the Program.</p>			
_____		_____	
Applicant Signature		Date	

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Human Resources Certification To be completed by the Human Resources Office or Executive Director

Name of Educational Institution	City where office is located
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This Educational Institution is a School of Nursing at: (Check One)

Diploma School

Vocational School

Associate Degree/Community College

Baccalaureate School/ Four-year institution

Applicant's Job Title	Date the applicant was hired as a full-time Faculty (MM/DD/YYYY)
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This applicant teaches at an Eligible Institution in the State of New Jersey as defined below: <input type="checkbox"/> YES <input type="checkbox"/> NO	Applicant is employed: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
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Certification

I certify that the information I have provided is true, correct and complete according to our organization's records.

Employer's Signature	Date
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Print your Name	Title	Telephone
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Mailing Instructions**DON'T FORGET!**

- ✓ A copy of your college transcripts that shows your graduate degree, grade point average (GPA) and graduation date
- ✓ Your student loan billing statement that shows your lender's name, address and account balance. Only loans related to approved graduate degree programs are eligible for loan redemption.
- ✓ Employer's certification (and supporting documentation, if required)

Please return completed application with the required documents to:

HESAA
 Special Loans Unit
 PO Box 549
 Trenton, NJ 08625-0549

Questions? Call our Customer Care Center at 800-792-8670.

Program Definitions effective July 1, 2010

Eligible Institution: School of Nursing that is nationally accredited and licensed by the New Jersey Board of Nursing or a nursing program at a Commission on Higher Education licensed institution of higher education that is nationally accredited and licensed by the New Jersey Board of Nursing.

Nursing Faculty: The program shall provide loan redemption in exchange for full-time faculty employment at a school of nursing in the State of New Jersey for a five year period following completion of the approved graduate degree program.

Program eligibility:

- be a resident of the state of New Jersey and maintain domicile in the state during participation in the program and
- Have obtained a master's degree in nursing (MSN), a doctor of nursing science degree (DNS), a doctor of nursing practice degree (DNP), a doctor of philosophy degree (PhD) in nursing or another relevant field of study within a one year period prior to being hired for full time faculty employment on or after January 16, 2010
- Have maintained a grade point average of 3.0 or higher on a scale of 4.0 or its equivalent, while enrolled in a approved graduate degree program.
- A program participant shall enter into a written contract with the authority to participate in the program. The contract shall specify the duration of the applicant's required service and the total amount of eligible student loan expenses to be redeemed by the authority in return for service.