



BEAUFORT
 COUNTY COMMUNITY COLLEGE
 Office of Financial Aid

5337 Highway 264 East
 Washington, NC 27889
 T: 252.940.6222
 F: 252.940.6393
 finaid@beaufortccc.edu

2025-2026
Fresh Start Acknowledgment Form

Student Name: _____ Student ID: _____

I, _____, 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.

Student Name: _____ Student ID: _____

Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

 Student's Signature (Required)

 Date

 Parent's Signature (Required if student is dependent)

 Date

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.