



CORNELIUS
FINANCIAL
SOLUTIONS
Credit Restoration & Beyond

Student Loan Resolution Intake Document

We understand the details we ask for can be highly personal, we recognize their necessity in completing the entire student loan resolution process. Your privacy and security are of utmost importance to us, and we handle your information with the highest care and confidentiality throughout the process.

Please complete each of the fields all information is required apart from 'FSA Username' and 'FSA Password'. If you do not have these credentials, we will either recover or reset this information with the Department of Education.

The personal references cannot live with the borrower or live with each other.

Demographics:

First Name

Middle Name

Last Name

Date of Birth

SSN

Phone Number

Driver's License Number

Driver's License Issuing State

Street Address

City

State

Zip Code

| |
|--|
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

Billing Information:

Bank Name

Routing Number

Account Number

| |
|--|
| |
| |
| |

FSA Credentials:

FSA Username

FSA Password

| |
|--|
| |
| |

Personal information:

Marital Status

Tax Filing Status

Adjusted Gross Income

Total Number in Household

Number of Children

Number of Adults

| |
|--|
| |
| |
| |
| |
| |
| |

Employment Information:

| | | | | |
|-----------------------|----------------------|--------------------------|------------|--------------------------|
| | W2 | <input type="checkbox"/> | 1099 | <input type="checkbox"/> |
| Employment Type | Self Employed | <input type="checkbox"/> | Unemployed | <input type="checkbox"/> |
| | Retired | <input type="checkbox"/> | | |
| Frequency of Pay | Weekly | <input type="checkbox"/> | Bi-Weekly | <input type="checkbox"/> |
| | Semi-Monthly | <input type="checkbox"/> | Monthly | <input type="checkbox"/> |
| Employer Name | <input type="text"/> | | | |
| Employer Phone Number | <input type="text"/> | | | |
| Employer Address | <input type="text"/> | | | |
| Employer City | <input type="text"/> | | | |
| Employer State | <input type="text"/> | | | |
| Employer Zip Code | <input type="text"/> | | | |

Reference 1:

| | |
|--------------------------|----------------------|
| First Name | <input type="text"/> |
| Last Name | <input type="text"/> |
| Address | <input type="text"/> |
| City | <input type="text"/> |
| State | <input type="text"/> |
| Zip Code | <input type="text"/> |
| Relationship to Borrower | <input type="text"/> |

Reference 2:

| | |
|--------------------------|----------------------|
| First Name | <input type="text"/> |
| Last Name | <input type="text"/> |
| Address | <input type="text"/> |
| City | <input type="text"/> |
| State | <input type="text"/> |
| Zip Code | <input type="text"/> |
| Relationship to Borrower | <input type="text"/> |

SIGNATURE _____ DATE _____