IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

In re:)	
[DEBTOR],) Case No	
Debtors.) Chapter [7])) _)	
[DEBTOR],)	
Plaintiff,) Adversary I	Pro
v.)	
UNITED STAT	ES DEPARTMENT N, [et al.],)))	
Defenda	nt[s].)	
I, <u>[NAM</u>	ATTESTATION OF REQUEST FOR STOR DISCHARGEABILITIES, make this Attestation in support of the state of the stat	Y OF STUDENT LO	EDING OANS
loans described	herein from discharge would caus	e an "undue hardship'	' to myself and my
dependents within the meaning of 11 U.S.C. §523(a)(8). In support of this Attestation, I state the			
following under	penalty of perjury:		
	I. PERSONAL IN	IFORMATION	
1. I	am over the age of eighteen and a	m competent to make	this Attestation.
2. I	reside at [ac	ldress], in	County, [State].
3. N	My household includes the following	ng persons (including	myself):
	[full name] [age	[self	ין

	[full name]	[age]	[relationship]	
	[full name]	[age]	[relationship]	
and your edu the Assistant to you. If you educational a do not need to AUSA at the answer these loan which y	ur through nine request in acational history. The Depote United States Attorney ("2 agree that the information history is accurate, you make to be completed. If you have time you are completing the questions based upon you are seeking to dischargomplete and accurate infor	urtment of Educe AUSA") handling provided to your simply confirmed to the not received the form, or if the rown knowledge in this adverse	ration will furnish this infing your case, and it should be regarding your student in that you agree, and these that you agree, and these information from Educate information is not accurate. If you have more than ary proceeding, please con	formation to d be provided loan debt and se questions cation or the rate, you may one student ifirm that the
4.	I confirm that the student	loan informatio	n and educational history	provided to me
and attached	to this Attestation is correc	t: <u>YES / NO</u> [If	you answered "NO," you	must answer
questions fiv	e through nine].			
5.	The outstanding balance	of the student lo	an[s] I am seeking to discl	narge in this
adversary pro	oceeding is \$	·		
6.	The current monthly pays	nent on such loa	an[s] is	The
loan[s] are so	cheduled to be repaid in		[month and year] [Ol	R] My
student loan[s] went into default in	[month	and year].	
7.	I incurred the student loa	n[s] I am seekin	g to discharge while attend	ling
	, where I wa	as pursuing a	degree with a	a specialization
in				
8.	In [mo	onth and year], I	completed my course of s	study and
received a	degree	e [OR] In	[month and y	ear], I left my
course of stu	dy and did not receive a deg	gree.		

	9.	I am currently employed as a	My employer's name and
addres	s is	[OR]	I am not currently employed.
		II. CURRENT INCOME A	ND EXPENSES
	10.	I do not have the ability to make payme	ents on my student loans while maintaining
a minii	mal sta	andard of living for myself and my housel	nold. I submit the following information to
demon	strate	this:	
	A. <u>H</u>	ousehold Gross Income	
	11.	My current monthly household gross in	acome from all sources is \$¹
This ar	mount	includes the following monthly amounts:	
		my <i>gross</i> income from employm	ent (if any)
		my unemployment benefits	
		my Social Security Benefits	
		my	
		my	
		my	
		gross income from employment	
		unemployment benefits received	
		Social Security benefits received	•
		other income from any source re	ceived by other members of household
	12.	The current monthly household gross in	ncome stated above (select which applies):

¹ "Gross income" means your income before any payroll deductions (for taxes, Social Security, health insurance, etc.) or deductions from other sources of income. You may have included information about your gross income on documents previously filed in your bankruptcy case, including Form B 106I, Schedule I - Your Income (Schedule I). If you filed your Schedule I within the past 18 months and the income information on those documents has not changed, you may refer to that document for the income information provided here. If you filed Schedule I more than 18 months prior to this Attestation, or your income has changed, you should provide your new income information.

	Includes a monthly average of the gross income shown of	on the most recent tax
retur	n[s] filed for myself and other members of my household, w	which are attached, and
the a	mounts stated on such tax returns have not changed materia	lly since the tax year of
such	returns; OR	
	Represents an average amount calculated from the most	recent two months of
gross	s income stated on four (4) consecutive paystubs from my cu	arrent employment,
whic	h are attached; OR	
	My current monthly household gross income is not accur	rately reflected on either
recen	nt tax returns or paystubs from current employment, and I ha	ave submitted instead the
follo	wing documents verifying current gross household income f	from employment of
house	ehold members:	
13.	In addition, I have submitted	verifying the sources of
income other	r than income from employment, as such income is not show	wn on [most recent tax
return[s] or p	paystubs].	
B. <u>M</u>	Monthly Expenses	

14. My current monthly household expenses do not exceed the amounts listed below based on the number of people in my household for the following categories [Indicate "yes" if your expenses do <u>not</u> exceed the referenced amounts]:

(a) Living Expenses²

i. Food \$431 (one person) YES / NO

² The living expenses listed in Question 14 and 15 have been adopted from the Internal Revenue Service Collection Financial Standards "National Standards" and "Local Standards" for the year in which this form is issued. This form is updated annually to reflect changes to these expenses.

[Updated November 2022]

\$779 (two persons) \$903 (three persons) \$1028 (four persons) ii. Housekeeping supplies YES / NO \$40 (one person) \$82 (two persons) \$74 (three persons) \$85 (four persons) iii. Apparel & Services YES / NO \$99 (one person) \$161(two persons) \$206 (three persons) \$279 (four persons) Personal care products and services YES / NO iv. (non-medical) \$45 (one person) \$82 (two persons) \$78 (three persons) \$96 (four persons) Uninsured medical costs YES / NO v. \$75 (per individual under 65) \$153 (per individual over 65) vi. Miscellaneous expenses YES / NO not included elsewhere on this Attestation: \$170 (one person) \$306 (two persons) \$349 (three persons) \$412 (four persons)

(b) Households Greater Than Four Persons

If your household consists of more than four people, please provide your *total* expenses for the categories in Question 14(a): \$

[If you filed a Form 122A-2 Chapter 7 Means Test or 122C-2 Calculation of Disposable Income in your bankruptcy case, you may refer to lines 6 and 7 of those forms for information.]³

³ Forms 122A-2 and 122C-2 are referred to collectively here as the "Means Test." If you filed a Means Test in your bankruptcy case, you may refer to it for information requested here and in other expense categories below. If you did not file a Means Test, you may refer to your Schedule

(c) Excess I	Expenses		
If your current monthly household expenses exceed the amounts listed above for any of the categories in Question 13(a) and you would like the AUSA to consider such additional expenses as necessary, you may list those expenses and explain the need for such expenses here.			
15. My o	current monthly household expenses in the follow	ring categories are as	
follows:			
(a) Payroll I	<u>Deductions</u>		
i.	Taxes, Medicare and Social Security	\$	
	[You may refer to line 16 of the Means Test or	Schedule I, line 5]	
ii.	Contributions to retirement accounts	\$	
	[You may refer to line 17 of the Means Test or	Schedule I, line 5]	
	Are these contributions required		
	as a condition of your employment?	YES / NO	
iii.	Union dues	\$	
	[You may refer to line 17 of the Means Test or	Schedule I, line 5]	
iv.	Life insurance	\$	
	[You may refer to line 18 of the Means Test or Schedule I, line 5]		
	Are the payments for a term policy	YES / NO	
	covering your life?		
v.	Court-ordered alimony and child support	\$	
	[You may refer to line 19 of the Means Test or	Schedule I, line 5]	

I and Form 106J - Your Expenses (Schedule J) in the bankruptcy case, which may also list information relevant to these categories. You should only use information from these documents if your expenses have not changed since you filed them.

vi.	Health insurance	\$
	[You may refer to line 25 of the Means Test or Sc	hedule I, line 5]
	Does the policy cover any persons other than	
	yourself and your family members?	YES / NO
vii.	Other payroll deductions	
		\$
		\$
		\$
) <u>Housing</u>	Costs ⁴	
i.	Mortgage or rent payments	\$
ii.	Property taxes (if paid separately)	\$
iii.	Homeowners or renters insurance	\$
	(if paid separately)	
iv.	Home maintenance and repair	\$
	(average last 12 months' amounts)	ф
v.	Utilities (include monthly gas, electric	\$
	water, heating oil, garbage collection,	
	residential telephone service,	
	cell phone service, cable television, and internet service)	
Transpoi	tation Costs	
i.	Vehicle payments (itemize per vehicle)	\$
ii.	Monthly average costs of operating vehicles	\$
	(including gas, routine maintenance,	
	monthly insurance cost)	
iii.	Public transportation costs	\$
Other No	ecessary Expenses	
	Court-ordered alimony and child support payments	\$
,	If not deducted from pay) You may refer to line 19 of Form 122A-2 or 122C-2	~

⁴ You should list the expenses you actually pay in Housing Costs and Transportation Costs categories. If these expenses have not changed since you filed your Schedule J, you may refer to the expenses listed there, including housing expenses (generally on lines 4 through 6 of Schedule J) and transportation expenses (generally on lines 12, 15c and 17).

Explain the circumstances making it necessary	
for you to expend this amount:	
Health insurance	\$
(if not deducted from pay) [You may refer to line 25 of the Means Test or Sc	hedule J, line 15
Does the policy cover any persons other than yourself and your family members?	YES / NO
Life insurance	\$
(if not deducted from pay) [You may refer to line 25 of the Means Test or Sc	hedule J, line 15
Are the payments for a term policy covering your life?	YES / NO
Dependent care (for elderly or disabled family members)	\$
[You may refer to line 26 of the Means Test or Sc	hedule J, line 19
Explain the circumstances making it necessary for you to expend this amount:	

⁵ Line 8 of Schedule J allows listing of expenses for "childcare and children's education costs." You should not list any educational expenses for your children here, aside from necessary nursery or preschool costs.

V		Payments on delinquent federal, state or local tax [You may refer to line 35 of the Means Test or Sc	
		Are these payments being made pursuant to an agreement with the taxing authority?	YES / NO
V		Payments on other student loans I am not seeking to discharge	\$
V		Other expenses I believe necessary for a minimal standard of living.	\$
		Explain the circumstances making it necessary for you to expend this amount:	
16.	Aft	er deducting the foregoing monthly expenses from	my household gross
income, I ha	ve	[no, or amount] remaining income.	
17.	In a	ddition to the foregoing expenses, I anticipate I wi	ll incur additional monthly
expenses in	the fut	ure for my, and my dependents', basic needs that a	are currently not met.6 These
include the f	ollowi	ng:	

⁶ If you have forgone expenses for any basic needs and anticipate that you will incur such expenses in the future, you may list them here and explain the circumstances making it necessary for you to incur such expenses.

III. <u>FUTURE INABILITY TO REPAY STUDENT LOANS</u>

	18.	For the following reasons, it should be presumed that my financial circumstances
are unl	ikely to	o materially improve over a significant portion of the repayment period (answer all
that ap	ply):	
		I am over the age of 65.
		The student loans I am seeking to discharge have been in repayment status for at least 10 years (excluding any period during which I was enrolled as a student).
		I did not complete the education for which I incurred the student loan[s].
		I have a permanent disability or chronic injury which renders me unable to work or limits my ability to work.
		Describe the disability or injury and its effects on your ability to work, and indicate whether you receive any governmental benefits attributable to this disability or injury:
		I have been unemployed for at least five of the past ten years.
		Please explain your efforts to obtain employment.
	19.	For the following additional reasons, my financial circumstances are unlikely to
materia	ally imp	prove over a significant portion of the repayment period (answer all that apply):
		I incurred student loans I am seeking to discharge in pursuit of a degree I was unable to complete for reasons other than the closure of the educational institution.
		Describe your reasons for being unable to complete the degree:

	I am not currently employed.
	I am currently employed, but I am unable to obtain employment in the field which I am educated or have received specialized training.
	Describe reasons for inability to obtain such employment, and indicate if yo have ever been able to obtain such employment:
_	
	I am currently employed, but my income is insufficient to pay my loans and unlikely to increase to an amount necessary to make substantial payments of student loans I am seeking to discharge.
	Please explain why you believe this is so:
	Other circumstances exist making it unlikely I will be able to make paymer a significant part of the repayment period.
	Explain these circumstances:
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[Updated November 2022]

IV. PRIOR EFFORTS TO REPAY LOANS

	20.	I have made good faith efforts to repay the student loans at issue in this
procee	ding, in	cluding the following efforts:
	21.	Since receiving the student loans at issue, I have made a total of \$ in
payme	nts on t	he loans, including the following:
	reş	gular monthly payments of \$ each.
	ad	ditional payments, including \$, \$, and \$
	22.	I have received forbearances or deferments, for a period totaling
months	s.	
	23.	I have attempted to contact the company that services or collects on my student
loans c	or the D	epartment of Education at least times.
	24.	I have sought to enroll in one or more "Income Deferred Repayment Programs"
or simi	ilar repa	yment programs offered by the Department of Education, including the following
	Descri	ption of efforts:
	25.	[If you did not enroll in such a program]. I have not enrolled in an "Income
Deferr	ed Repa	yment Program" or similar repayment program offered by the Department of
Educat	ion for	the following reasons:

empting to r					
empting to r		ther facts indic			
empting to r		ther facts indic			
	epay the loan, in		ating you have	acted in good faith in the J	oast in
nimize your	1 2	ncluding effort	s to obtain emp	loyment, maximize your i	ncome
	expenses:				
	-				
		V. <u>CUR</u>	RENT ASSET	<u>S</u>	
27.	I own the follow	wing parcels of	real estate:		
Addres	S:				
	-			_	
	-			_	
	-			_	
Owners	. . 7				
	-			_	
	-			_	
Fair ma	rket value:			_	

⁷ List by name all owners of record (self and spouse, for example)

1		ages and		
	28.	I own the following motor ve	ehicles:	
_	Make	and model:		
]	Fair m	arket value:		
	Vehicl	palance of e loans ther liens		
	29.	I hold a total of	in retirement asso	ets, held in 401k, IRA
and sim	ilar re	tirement accounts.		
:	30.	I own the following interests	in a corporation, limited liabi	lity company,
partners	ship, o	r other entity:		
]	Name	of entity	State incorporated ⁸	Type ⁹ and %age Interest
-				
	31.	I currently am anticipating re	eceiving a tax refund totaling S	\$
		VI. <u>ADDITION</u>	NAL CIRCUMSTANCES	
:	32.	I submit the following circur	nstances as additional support	for my effort to
discharg	ge my	student loans as an "undue ha	rdship" under 11 U.S.C. §523	(a)(8):
8 The st business	ate, if s entiti	any, in which the entity is incees might not be incorporated.	orporated. Partnerships, joint v	ventures and some other

⁹ For example, shares, membership interest, partnership interest.

[Update	ed November 2022]		
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Pursuan correct.	nt to 28 U.S.C. § 1746, I declare unde	r penalty of perjury that the foregoing is true ar	nd
		Signature:	
		Name:	
		Date:	