EMPLOYER NOTICE OF CHANGE IN EMPLOYMENT

STUDENT LOANS OF NORTH DAKOTA

SFN 51494 (08-2013)

Section 326 of the USA PATRIOT Act[1] requires us to ask for the borrower's Social Security Number. The principal purpose and routine uses of this information are to verify the borrower's identity, provide for the servicing of the borrower's account or loan, including communications with consumer reporting agencies, and in the event it is necessary, to locate the borrower and collect on the borrower's loan(s). Providing any requested information is mandatory in order to receive the requested service. We may not be able to grant the service if the requested information is not provided.

[1] This notice also satisfies our obligations under the Privacy Act of 1974.

I, _____, on behalf of _____
(Name) *(Employer)*

notify Student Loans of North Dakota (SLND) of the following information:

Debtor's Information:

Name	Social Security Number		
Date of Termination (mm/dd/yyyy)	Last Known Telephone Number (include area code)		
Last Known Street Address	City	State	ZIP Code

Debtor's Subsequent Employer Information (if available):

Name	Telephone Numbe (include area code)		
Street Address	City	State	ZIP Code

Form completed by:

Signature	Date
Title	Telephone Number (include area code)

RETURN THIS FORM WITHIN 10 BUSINESS DAYS OF TERMINATION OF EMPLOYMENT TO:

Student Loans of North Dakota
PO Box 5524
Bismarck, ND 58506-5524