EXHIBIT D

NFLP EMPLOYMENT CERTIFICATION FORM

(Applicant's name) ______________ entered into a contractual agreement with the University of West Georgia as a participant in the Nurse Faculty Loan Program (NFLP). This program requires the participant to be employed full-time as nurse faculty in an accredited school(s) of nursing for a complete year in order to receive cancellation of his/her loan. If full-time status is obtained through more than one part-time position, each employer must complete this form. Please complete the Employment Certification form at the bottom and return by (mm-dd-yyyy) to the following:

[illegible]

Fax to [*Lending School Fax #*]: 678-839-5649

PART I: TO BE COMPLETED BY NFLP RECIPIENT

Name: ______________________________

Permanent Address: ______________________________ Phone Number: ______________

Place of Employment: ______________________________

Address: ______________________________

Beginning Date of Employment as Nurse Faculty: ____ Month ____ Day ____ Year

Position Title: ______________________________

This position is: Full-time ____ Part-time [illegible]

If part-time, # of hours employed per week: ______________

I CERTIFY that I am employed full-time or part-time as Nurse Faculty in the above named school of nursing, and all the information is true and correct to the best of my knowledge. If I change employment status, I will notify the University of West [illegible]

Signature: ______________________________ Date: ______________

PART II: TO BE COMPLETED BY EMPLOYER

I CERTIFY that the statements above concerning service of the above named NFLP loan recipient as a full-time nurse faculty are [illegible]

Name of Certifying Official: ______________________________

Title: ______________ Phone Number: ______________ Fax Number: ______________

Signature: ______________________________ Date: ______________

If the above named participant has not maintained faculty status during this period, please provide the date(s) and explanation for the change.

Date(s): ______________

Explanation:

____

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[illegible] MAY INCLUDE FINES AND IMPRISONMENT UNDER FEDERAL STATUTE.