

PEACE CORPS CERTIFICATION REQUEST FORM

INSTRUCTIONS: Please send your completed request form via email to certify@peacecorps.gov and allow 7-10 business days of receipt to respond. If your request contains sensitive personal information, you can mail to ATTN: Certification Specialist, 1111 20th Street NW, Washington, DC 20526.

Last Name of Volunteer:	First Name of Volunteer:	Middle Name:
Name During Service:	Country of Service:	
	Dates of Service:	
Requestor's Name:	Requester's Email Address:	Requester's Phone Number:

Type of Certification Request without the Volunteer's Social Security Number (SSN). Please check all that apply. Verifications listed in this section will not include any portion of the Volunteer's SSN.

- Certification of Service for Credit towards Retirement or for Employment Purposes (verifies dates, country, and month Readjustment allowance amount).
- Certification of Noncompetitive Eligibility (can only send if COS date was less than 3 years ago).
- Teaching Certification of Volunteer Service (Must have served 18 months, training time included).
- Description of Service (copy)

Types of Certification with the Volunteer's Social Security Number (SSN).

- Certification of Creditable Health Insurance Coverage (i.e., for Medicare Part B purposes). Full SSN included.
- Student Loan Verification (includes last 4 digits of SSN for identification purposes, unless otherwise requested). BEFORE REQUESTING, FIRST CALL FEDLOAN SERVICING AT 855.265.4038 TO SEE IF & HOW YOU MAY QUALIFY

Check all that apply:

- Certification of eligibility for Loan Deferment
- Certification of eligibility for Partial Perks Loan Cancellation (Must have served 1 year, including training)
- Public Service Loan Forgiveness
- Proof of Income for Income-Driven Repayment Plan

Since the Certification in this section includes all or part of the Volunteer's SSN, the requests above require the signature of one of the following:

Please indicate if you are:

- The Volunteer (current or returned)
- The Volunteer's Power of Attorney (please provide proof)
- The Designee of the Volunteer's Peace Corps Privacy Act Waiver

Sign here to acknowledge that all or a portion of the Volunteer's Social Security Number will included be in the Peace Corps Certification Request. _____

Name of Person Receiving Requested Documents:		
How would you like the documents sent?		
By Post (indicate mailing address):	By Email (indicate email address):	By Fax (indicate fax number):



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This notice is provided under the Privacy Act of 1974, as amended (5 U.S.C. §552a). The information requested is collected under the authority of the Peace Corps Act, 22 U.S.C. §2501 et seq., for processing your request for verification of Peace Corps service. This information may also be used for the routine uses described in the Privacy Act, 5 U.S.C. § 552a, System of Records, (www.peacecorps.gov), and in the Federal Register at 65 Fed. Reg. 53,772 (September 5, 2000). Providing the material herein is completely voluntary. Failure to provide sufficient information will not preclude the processing of your request. PC-CFO/VPS – 128.2 (08/2009, revised 02/2010, revised 08/2014).