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**One-Time Consultation Client Intake Form: Medical Residents, Fellows and Attending Physicians** 

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## **INSTRUCTIONS: PLEASE READ CAREFULLY**

- 1. Complete the information requested below, save a copy, and send to <a href="mailto:paul@PGPresents.com">paul@PGPresents.com</a>.
- 2. Go to StudentAid.gov and access your "dashboard" listing all your federal loans. Send us the entire listing, including loan details, preferably as a PDF.
- 3. Under Student Loans below, use the drop down menu and list only loans that are NOT at <u>StudentAid.gov</u>, such as private loans and loans directly from your school.
- 4. We will contact you to schedule your consultation once the Client Intake Form and federal student loan summary from <a href="StudentAid.gov">StudentAid.gov</a> are received.

Full Name	Medical School		Graduation Date		
Phone Number	Residency Program		Completion Date		
		For example, Pediatrics at State University Hospito	al		
Email Address	Current Status		Fellowship		
		For example, M4, PGY-1, PGY-2, etc.			
Marital Status Family Size If	married, do you file jointly? Yes	No Did not file a prior year retu	rn Current state where you reside		
Prior year Adjusted Gross Income (AGI) Estimated current Annual Gross Income					
Current loan servicer for your federal loans?	t loan servicer for your federal loans?  Current monthly payment on your federal loans?				
Are you in repayment on federal loans? Yes	No If yes, what kind of p	lan?	If an income plan, date of recertification?		
Student Loans* Aca	ademic Year - Current Bala	nce % Rate Status	Current Loan Servicer		
Student Louis					
*Do not include any loans listed at <u>StudentAid.gov</u> (see Step 3 above).	Total	1			
What is the total monthly payment on your NON federal loans listed above, if you are in repayment status?					
<b>Questions? Email</b>			Print Form		

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