



DEPARTMENT OF HEALTH & HUMAN SERVICES

Health Resources and Services
Administration

Bureau of Health Professions

Rockville, Maryland 20857

December 19, 2006

To: Lenders and Holders Participating in the Health Education Assistance Loan
(HEAL) Program

Subject: Newly Issued REPAYMENT SCHEDULE (**VARIABLE RATE**) HRSA
Form 502-1, REPAYMENT SCHEDULE (**FIXED RATE**) Form 502-2 and
HOLDER'S REPORT ON HEALTH EDUCATION ASSISTANCE LOANS
HRSA Form 512 - HEAL Lender Policy Memorandum L-2007-2

Each of the above-referenced forms have been approved by the Office of
Management and Budget (OMB) and given a new expiration date of December 31,
2009. We will allow the use of the older forms through February 28, 2007, however
after that date only the new forms will be accepted.

To obtain copies of these and other approved HEAL forms, please visit our web site
at <http://bhpr.hrsa.gov/dsa/healsite/forms.htm>.

If you have questions concerning this policy, please call Mr. Dick Horton on (301)
443-1540.

Sincerely,

Henry López, Jr.
Director
Division of Health Careers Diversity
And Development