

Unemployment Deferment Request For Primary Care Loans and Loans for Disadvantaged Students

Part I - General Information to be Completed by Borrower

Name: _____ Account Number: _____

Address: _____
City/State/Zip Code Telephone

Part II - Deferment Request

I became unemployed or began working less than 30 hours per week on _____, and my deferment will begin on this date. month/day/year

If you are eligible for unemployment benefits, check this box and attached the required documentation:

- I am eligible for unemployment benefits. I have attached documentation of my eligibility for these benefits. The documentation includes my name, address, social security number, and the effective dates of my eligibility to receive unemployment benefits.

If you are not eligible for unemployment benefits, or if your eligibility as expired, check the appropriate box below and provide the requested information:

- I registered with the following public or private employment agency on _____.

month/day/year

Name of Employment Agency: _____

Address: _____ Telephone: _____
City/State/Zip Code

Note: School placement offices and "temporary" agencies do not qualify as public or private employment agencies.

- I am registered with an employment agency because there is not one within 50 miles of my permanent or temporary address. If I am not residing at my permanent address, my temporary address is:

Address: _____
City/State/Zip Code

Part III - Borrower Interest Certification

Principal payments will be deferred but I am responsible for paying interest that accrues. I certify that the information I have provided is true and correct and that I understand the terms and conditions of the deferment for which I have applied.

Borrower's Signature _____ Date _____