

Federal Perkins Loan/NDSL Deferment & Forbearance Request

Name: _____ SSN: _____

Address: _____
City State Zip

Telephone No: _____ E-Mail Address: _____ Date of Birth: _____
(include area code)

Employer: _____ Employer's Phone No: _____

Please check **ALL** statements that apply to you:

_____ My Title IV student loan debt equals or exceeds 20% of my monthly gross income. I have itemized all my student loans in Part 3, including Subsidized and Unsubsidized Stafford Student Loans.

_____ My current financial situation prevents me from making my monthly Perkins Loan payment(s). I have explained this in Part 4.

_____ I have experienced prolonged illness or unemployment and have explained in Part 4.

_____ I have been granted an economic hardship deferment on my Stafford Loans and have attached supporting documentation.

_____ I am currently receiving federal or state public assistance such as AFDC, SSI, food stamps or State general public assistance and have provided supporting documentation.

_____ I am seeking but unable to secure full-time employment.

_____ I am registered with an employment agency. Agency Name: _____

_____ I am currently receiving unemployment benefits. Beginning Date: _____
Monthly Amount: _____

_____ I am not eligible for unemployment benefits.

_____ I have never been employed.

Please attach all supporting documentation such as proof of current earnings, statements for student loan payments, proof of unemployment benefits, etc.

Part 2 Income and Expense Summary

The following information is requested to determine your eligibility for economic hardship/unemployment deferment, forbearance, or a revision of your repayment schedule. The information you provide will remain confidential, however, we reserve the right to use this information if collection efforts become necessary.

1. Marital Status:

- Single
- Married
- Widow
- Separated/Divorced

2. Number of Dependents: _____

Relationship: _____ Age: _____

3. Monthly Income from ALL Sources:

Gross Monthly Salary/Wage \$ _____
 Net \$ _____
 Spouse's Monthly Salary/Wage \$ _____
 Net \$ _____
 Child Support Received \$ _____
 Alimony Support Received \$ _____
 Unemployment Benefits \$ _____
 Public Assistance \$ _____
 Social Security/Veteran Benefits \$ _____
 Stocks, Bonds & Investments \$ _____
 Parental Support (if applicable) \$ _____
 Other: _____ \$ _____
Total Monthly Income \$ _____

4. Monthly Expenses:

Rent/Mortgage \$ _____
 Utilities \$ _____
 Child Care \$ _____
 Car Payment(s) \$ _____
 Public Transportation \$ _____
 Insurance (car health, life) \$ _____
 Food \$ _____
 Telephone \$ _____
 Cellular Phone/Pager \$ _____
 Cable/Satellite TV \$ _____
 Credit Card(s) please list
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 Medical/Dental \$ _____
 Stafford Student Loans \$ _____
 Perkins Loan \$ _____
 Child Support/Alimony \$ _____
 Other _____ \$ _____
 _____ \$ _____

Total Monthly Expenses \$ _____

Part 3 Itemized Student Loan Information

Please itemize below ALL student loans below including spouse's (if applicable). Lender is the school or financial institution you received your loan from. Loan type is Perkins/NDL, Stafford, Direct, Consolidation, Health Professions/Nursing, etc.

Lender	Loan Type	Amount Borrowed	Monthly Payment
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

You must provide documentation of the above information, such as your recent monthly statement(s).

Part 4 Explanation of Circumstances

Please use this space to explain your current financial situation and any extenuating circumstances not provided for on this form.

Part 5 Certification Statements and Signature

I request a deferment or forbearance on my Federal Perkins/NDSL Loan.

I understand that all information and supporting documentation given will be held in the strictest confidence and will not be subject to dissemination outside the requirements of the University of Nebraska at Omaha's Perkins Loan Office in determining my eligibility for a deferment/forbearance on my loan.

I further understand that, if granted, the deferment/forbearance will consist of reduced or deferred payments, as determined by the Perkins Loan Office, based upon my financial situation. Depending on what type of assistance I am eligible for, my regularly scheduled payment amount may change upon the completion of the deferment/forbearance period.

I certify that all statements made are true and correct. I also certify that I will notify the Perkins Loan Office of any changes in my employment status or significant changes in my financial situation. I authorize the Perkins Loan Office to obtain pertinent information from sources listed on this application in order to verify the information provided.

Signature

Date

You must attach a copy of your most recent federal tax return.

Please forward the completed form (all pages) and supporting documentation to:

University of Nebraska at Omaha
Federal Perkins Loan Office
6001 Dodge Street, EAB 107
Omaha, NE 68182-0004

Please note: If the form is returned incomplete or without the necessary supporting documentation, your application will be returned to you.

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Part 6 Lender Section (to be completed by the Perkins Loan Office Only)

____ Forbearance Granted from _____ to _____. Interest Due: \$

____ Economic Hardship Deferment Granted from _____ to _____.

____ Unemployment Deferment Granted from _____ to _____.

____ Request Denied.

Comments:

Manager Approval:
Date: