

IN SCHOOL

DEFERMENT APPLICATION

Part I: To be completed by the Borrower

Name _____ SSN _____

Address _____

City _____ State _____ Zip _____

I hereby apply for an interest-free deferment of my Perkins student loan repayments. I am pursuing at least half-time study in the higher education institution certified below. I waive any unexpired portion of my original grace period. I understand though there is no overall maximum limit for student deferments, I must re-apply each term.

I'm enrolled for the _____ term from _____ thru _____.
(mm/dd/yyyy) (mm/dd/yyyy)

I intend to continue thru the _____ term which ends on _____.
(mm/dd/yyyy)

I'm seeking a degree or certificate as:

at least a half-time student a full-time student

My daytime telephone number is _____

Date _____ Signed _____

Part II: To be completed by the school you are now attending

I hereby certify that the information stated by the borrower above is true and correct to the best of my knowledge.

Enrollment is verified from _____ thru _____

Name of Institution _____ *Affix seal or stamp*

City & State _____

Telephone _____

Title IV Institution OPE ID Code _____

Date _____ Signed _____