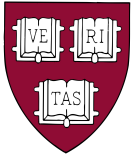


**HARVARD UNIVERSITY STUDENT LOAN OFFICE**

RICHARD A. and SUSAN F. SMITH CAMPUS CENTER 801,  
1350 Massachusetts Avenue, Cambridge, MA 02138



**REQUEST FOR DEFERMENT/FORBEARANCE OF LOAN REPAYMENT OF HARVARD, HPSSL and LDS LOANS**

NOTE: Deferment and/or Forbearance cannot be granted until this form is properly certified, and supporting documentation has been returned to the HARVARD UNIVERSITY STUDENT LOAN OFFICE.

Federal statutes limit our ability to backdate a deferment request. Please submit this form as soon as you are eligible for a deferment.

**PART 1: TO BE COMPLETED BY THE BORROWER**

**CHANGE OF ADDRESS**

\_\_\_\_\_  
Harvard ID#

( ) \_\_\_\_\_  
Phone

\_\_\_\_\_  
Borrower's Name

\_\_\_\_\_  
E-Mail

\_\_\_\_\_  
Address Street Apt. #

\_\_\_\_\_  
City State Zip

This is to certify that I am: (Check appropriate item)

- 1 \_\_\_\_\_ A full-time student
- 2 \_\_\_\_\_ At least a half-time student
- 3 \_\_\_\_\_ A full-time graduate fellow-see back for eligibility
- 4 \_\_\_\_\_ A member of the U.S. Armed Forces
- 5 \_\_\_\_\_ A member of the U.S. Public Health Service Commissioned Corps
- 6 \_\_\_\_\_ A full-time Peace Corps/VISTA volunteer
- 7 \_\_\_\_\_ A full-time volunteer at an eligible Volunteer Organization
- 8 \_\_\_\_\_ A full-time teacher in a state-designated teacher shortage area
- 9 \_\_\_\_\_ A member of the National Oceanic and Atmospheric Administration
- 10 \_\_\_\_\_ **OTHER (Temporary Disability, Unemployment, Economic Hardship, Clerkship\*\*)** ADDITIONAL DOCUMENTATION WILL BE REQUIRED. Contact Student Loan Office for more information. (800) 343-5500, (800) 315-7192, or (617) 495-3782

**Choose one:**

- I WILL MAKE MONTHLY INTEREST PAYMENTS ON MY UNSUBSIDIZED LOAN(S). I UNDERSTAND FAILURE TO DO SO WILL NEGATIVELY IMPACT MY CREDIT STANDING.
- THE INTEREST ON MY LOAN(S) WILL BE CAPITALIZED (added to my principal balance) AT THE END OF THE DEFERMENT/FORBEARANCE\*\* PERIOD AND WILL RESULT IN MY MONTHLY PAYMENT BEING RE-AMORTIZED.

I am requesting deferment for the period **FROM** \_\_\_\_\_ **TO** \_\_\_\_\_ I will continue in this deferment status until \_\_\_\_\_  
mo yr mo yr mo yr  
 (Duration indicated can be no longer than 12 months)

I CERTIFY THAT ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AGREE TO NOTIFY THE HARVARD UNIVERSITY STUDENT LOAN OFFICE IMMEDIATELY UPON TERMINATION OF MY STATUS.

**X** \_\_\_\_\_  
Borrower's Signature

\_\_\_\_\_  
Date

**PART 2: CERTIFICATION OF STATUS** (Authorized officials include Registrars, Commanding Officers, Chief State School Officers and Officials of: Fellowship programs, Peace Corps/VISTA, Volunteer Organizations, NOAA); Physicians may also complete this portion or may attach a letter to certify status of aforementioned individual and their state of temporary disability.

Anticipated completion or graduation date: \_\_\_\_\_ I \_\_\_\_\_ I \_\_\_\_\_  
mo day yr mo day yr

The information in PART 1 above is correct for the period from \_\_\_\_\_ I \_\_\_\_\_ I \_\_\_\_\_ to \_\_\_\_\_ I \_\_\_\_\_ I \_\_\_\_\_ and any additional conditions for eligibility as set forth on this form have been met. I CERTIFY THE INFORMATION STATED ABOVE TO BE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

\_\_\_\_\_  
Name of Organization/Agency/Institution

\_\_\_\_\_  
Signature of Official

\_\_\_\_\_  
Address Street

\_\_\_\_\_  
Title Official Stamp or Seal (if applicable)

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Date Phone

COMMENTS: \_\_\_\_\_ OPE-ID# \_\_\_\_\_

Return certified form to:  
**Harvard University Student Loan Office, Richard A. and Susan F. Smith Campus Center 801**  
**1350 Massachusetts Avenue, Cambridge, MA 02138** Please refer to your Exit Interview, promissory note, or contact the Student Loan Office at (617) 495-3782 to determine the deferment time limitation and eligibility of your loan(s).  
Some additional conditions for eligibility are listed further on this form.

e-mail address: [student\\_loans@harvard.edu](mailto:student_loans@harvard.edu) (617) 495-3782; (800) 315-7192 fax: (617) 495-1858

## DEFERMENT ELIGIBILITY REQUIREMENTS

### GRADUATE FELLOWSHIP

To qualify to receive this deferment, Federal Regulations require that:

- (1) The fellowship program:
  - (i) Provides sufficient financial support to graduate fellows to allow for full-time study for at least six months; and
  - (ii) Requires, prior to award of that financial support, a written statement from the applicant which explains the applicant's objectives; and
  - (iii) Requires a graduate fellow to submit periodic reports, projects, or other evidence of the graduate fellow's progress; and
- (2) The borrower:
  - (i) Holds at least a Baccalaureate Degree conferred by an institution of higher education; and
  - (ii) Is engaged in full-time study that may be independent of an educational or cultural institution, in an academic or professional subject area for which the borrower has shown an interest and ability; and
  - (iii) Has been recommended by an institution of higher education for acceptance into the Graduate Fellowship Program

### REHABILITATION TRAINING (contact the Collection Department to apply: 1-800-343-5500 (outside MA) or (617) 495-1516)

To qualify to receive this deferment, Federal Regulations require that the rehabilitation training program meet the following requirements:

- (1) Recognition by a government agency with specific responsibilities for rehabilitation programs in the borrower's area; and
- (2) Agreement to provide services under a written, individualized plan for the borrower's rehabilitation that are specific as to the date services are expected to end; and
- (3) Structured in a way that requires a substantial commitment by the borrower to his or her rehabilitation (i.e. preventing the person from being employed 30 or more hours per week); and
- (4) Furnishes a statement from the provider of the rehabilitation services certifying that the borrower is either receiving or is scheduled to receive these services.

### \*VOLUNTEER IN A TAX EXEMPT ORGANIZATION

To qualify to receive this deferment, Federal Regulations require that the borrower:

- (1) Serves in an organization which is exempt from taxation under Section 501(c)(3) of the Internal Revenue Code of 1986; and
- (2) Provides service to low-income persons and their communities in order to assist them in eliminating poverty and poverty-related human, social and environmental conditions; and
- (3) Receives compensation that does not exceed the compensation received by a full-time volunteer in the Peace Corps or in a program administered by the ACTION agency. Compensation includes a subsistence allowance, necessary travel expenses and stipends; and
- (4) As part of his or her duties, must not give religious instruction, conduct worship services, engage in religious proselytizing, or engage in fund raising to support religious activities; and
- (5) Has agreed to serve on a full-time basis for a term of at least one year

### UNEMPLOYMENT (contact the Collection Department to apply: 1-800-343-5500 (outside MA) or (617) 495-1516)

To qualify to receive this deferment, Federal Regulations require that:

- (1) The borrower submit a written request signed and dated to the holder of the loan every six months, and
- (2) The request must contain a statement describing the borrower's search for full-time employment including documentation of at least six attempts to secure employment, the borrower's latest permanent home address and/or temporary address, certification that the borrower has registered with a public or private employment agency and the borrower's agreement to notify the lender promptly when he or she becomes employed.

### \*TEMPORARY TOTAL DISABILITY (contact the Collection Department to apply: 1-800-343-5500 (outside MA) or (617) 495-1516)

To qualify to receive this deferment, Federal Regulations require that:

- (1) The borrower who is "temporarily totally disabled" is one who, by reason of injury or illness, cannot be expected to be able to attend school or to be gainfully employed during an extended period of time of at least 60 days needed to recover from such an injury or illness; or
- (2) The borrower's spouse or dependent, subject to the above definition, requires continuous nursing or care by the borrower for at least 3 months.

### \*\* LAW CLERKSHIPS (contact the Student Loan Office to discuss your request for forbearance)

To qualify for this forbearance, Federal Regulations require that:

- (1) The borrower must provide a letter from authorized judge under whom they are completing their clerkship. Letter must include term of clerkship, and the forbearance granted will not exceed the time of the clerkship.
- (2) The borrower understands that interest is not subsidized under clerkship. The borrower is responsible for all accrued interest that accrues during the term of clerkship. Interest will be capitalized, and as a result will add more interest over the life of the loan.