



In-School Deferment Request

William D. Ford Federal Direct Loan Program
Federal Direct Stafford/Ford Loans, Federal Direct Unsubsidized Stafford/Ford Loans, Federal Direct PLUS Loans, Federal Direct Consolidation Loans

OMB No. 1840-0700
Form Approved
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At Least Half-Time Student, Graduate Fellowship, Rehabilitation Training Program

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

Borrower's Information

Please print legibly using blue or black ink.

Last Name	First Name	Middle Initial	Social Security Number
Street Address			Home Area Code/Telephone Number ()
City	State	Zip Code	

Section 1: Deferment Request

Must be completed by borrower. See definitions and eligibility criteria on the back of this form.

I meet the qualifications stated on the back of this form for the deferment checked below and request that the U.S. Department of Education (ED) defer repayment on my loan(s).

- Check one: While I am enrolled at an eligible school as **AT LEAST A HALF-TIME STUDENT**.
- While I am engaged in a full-time course of study in a **GRADUATE FELLOWSHIP** program.
- While I am engaged in a full-time **REHABILITATION TRAINING** program.

Borrower Understandings and Certifications

I understand that: (1) My deferment will begin on the date the deferment condition began but no more than six months before ED receives this request; (2) ED will not grant this deferment request unless all applicable sections of this form are completed and any additional required documentation is provided; (3) Principal payments will be deferred, but if my loan(s) is not subsidized by the federal government, I am responsible for paying the interest that accrues; (4) If I do not choose to pay all interest that accrues during my deferment period, ED will capitalize (see Definitions) such interest to the extent permitted by law. This will increase the principal balance of my loan(s); and (5) If my deferment does not cover all my past due payments, I may be granted a forbearance for all payments due before the begin date of my deferment.

I certify that: (1) The information provided in Section 1 above is true and correct; (2) I will provide additional documentation, as required, to ED to support my continued deferment status; (3) I will notify ED immediately when the condition(s) that qualified me for the deferment ends; and (4) I have read, understand, and meet the terms and conditions of the deferment for which I have applied as explained on the back of this form.

Signature of Borrower _____ Date _____

Section 2: Authorized Official's Certification

See the back of this form for a list of Authorized Officials. Please print or type.

I certify, to the best of my knowledge and belief, that the borrower named above is/was engaged in the program indicated in Section 1, and that the borrower and the borrower's program meet all the eligibility requirements specified on the back of this form.

Student Deferment Only

Item (1) and Item (2) of this section must be completed. The school may attach its own enrollment certification report listing the required information in lieu of completing this section.

The borrower:

(1) Is/was enrolled at least half-time during the academic period from (MM-DD-YY) to (MM-DD-YY) .

(2) Is reasonably expected to complete his/her program requirements on (MM-DD-YY) .

Graduate Fellowship Program and Rehabilitation Training Program Deferments Only

The borrower's program began (MM-DD-YY) and is expected to end(ed) (MM-DD-YY) .

Name of Educational Institution or Rehabilitation Facility _____

Address _____ Institution's ID Number _____

City, State, Zip Code _____ Telephone () _____

Signature of Authorized Official _____ Date _____

Name/Title of Authorized Official _____

Section 3 — Definitions/Eligibility Criteria for In-School Deferment Request

Definitions

- A **deferment** is a period during which I am entitled to postpone repayment of the principal balance of my loan(s). Interest does not accrue during an eligible deferment on Federal Direct Stafford/Ford Loans (Direct Subsidized Loans) or Federal Direct Subsidized Consolidation Loans (Direct Subsidized Consolidation Loans). I am responsible for the interest that accrues during this period on all other William D. Ford Federal Direct Loan (Direct Loan) Program loans.
- **Capitalization** is a process whereby ED adds unpaid interest to the principal balance of a loan(s).

Eligibility Criteria

I may defer (postpone) repayment of my loan(s) while I am:

- Enrolled at an eligible school as **AT LEAST A HALF-TIME STUDENT**.
- Engaged in a full-time course of study in a **GRADUATE FELLOWSHIP** program.

To qualify:

- (1) My graduate fellowship program must:
 - (a) provide sufficient financial support to allow for full-time study for a period of at least six months,
 - (b) require, prior to the awarding of financial support, a written statement from each applicant which explains the applicant's objectives,
 - (c) require a graduate fellow to submit periodic reports, projects, or other evidence of the graduate fellow's progress, and
 - (d) in the case of a course of study at a foreign university, accept the course of study for completion of the fellowship program.

- (2) I must:
 - (a) hold at least a Bachelor's Degree conferred by an institution of higher education, and
 - (b) have been accepted or recommended by an institution of higher education for acceptance into the graduate fellowship program on a full-time basis.
 - (3) If I am in a medical internship or residency program, I am not eligible for this deferment unless I am in a residency program for dentistry.
- Engaged in a full-time **REHABILITATION TRAINING** program.

To qualify:

- (1) My training program must:
 - (a) be licensed, approved, certified or recognized as providing rehabilitation training to disabled individuals by the Department of Veteran's Affairs or a state agency responsible for vocational rehabilitation, drug abuse treatment, mental health services, or alcohol abuse treatment programs;
 - (b) provide services under a written, individualized plan that specifies the date services are expected to end; and
 - (c) be structured in a way that requires a substantial commitment by me to my rehabilitation. ("Substantial commitment" means a commitment of time and effort that would normally prevent a person from being employed 30 or more hours per week in a position expected to last at least three months.)
- (2) I must be either receiving or scheduled to receive these rehabilitation services.

Authorized Certifying Officials

- Authorized School Official (*At Least Half-Time Student Deferment*)
- Authorized Graduate Fellowship Program Official (*Graduate Fellowship Program Deferment*)
- Rehabilitation Training Program Official (*Rehabilitation Training Program Deferment*)

Important Notices

Privacy Act Notice

The Privacy Act of 1974 (5 U.S.C.552a) requires that the following notice be provided to you. The authority for collecting the information requested on this form is §451 *et seq.* of the Higher Education Act of 1965, as amended. Your disclosure of this information is voluntary. However, if you do not provide this information, you cannot be considered for a deferment. The information on this form will be used to determine your eligibility for a deferment of repayment of your Direct Loan Program loan(s). The information you provide may be disclosed to federal and state agencies, private parties such as relatives, present and former employers and creditors, and contractors of the Department of Education for purposes of administration of the student financial assistance program, for enforcement purposes, for litigation where such disclosure is compatible with the purposes for which the records were collected, for use by federal, state, local, or foreign agencies in connection with employment matters or the issuance of a license, grant, or other benefit, for use in any employee grievance or discipline proceeding in which the Federal Government is a party, for use in connection with audits or other investigations, for research purposes, for purposes of determining whether particular records are required to be disclosed under the Freedom of Information Act, and to a Member of Congress in response to an inquiry from the congressional office made at your written request.

Return this form and any required documentation to the Direct Loan Servicing Center. If you need to confirm the Direct Loan Servicing Center's address or require assistance with completing this form, call 1 (888) 447-4460.

Paperwork Reduction Notice

The time required to complete this information collection is estimated to average 0.2 hours (12 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, DC 20202-4651. **If you have any comments or concerns regarding the status of *your individual submission* of this form, write directly to the Direct Loan Servicing Center. If you need to confirm the Direct Loan Servicing Center's address, call 1 (888) 447-4460.**