

DEFERMENT APPLICATION: NONPROFIT CHILD SVC OR FAMILY SVC AGENCY

I am a full-time employee of a public or private nonprofit child service or family service agency. I provide services or supervise the provision of services to high-risk children who are from low-income communities and to the families of such children.

I hereby apply for deferment of my student loan repayments. I waive any unexpired portion of my original grace period. After each complete year of eligible employment, I may re-apply for cancellation of a portion of my loan.

My daytime telephone number is _____

The current year of employment began _____ and ends _____

Date _____ Signed _____

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

Name of Organization _____

Affix seal or stamp ***

Street _____

City, State & Zip _____

Telephone _____

Date _____ Signed _____

DFCF

***Seal or stamp MUST be attached or the letterhead for the organization

For Institutional Use Only

Time Deferred_ _____

Official Name _____ Date processed _____

Official Name _____ Date processed _____