



UNEMPLOYMENT DEFERMENT REQUEST
Federal Perkins Loan

BORROWER INFORMATION (contact information below will be updated in account)

Name _____ Date _____

DU ID# _____ Last 4 of SSN _____

Street Address _____

City, State, Zip _____ Email _____

Daytime Phone _____ Cell Phone _____

UNEMPLOYMENT STATUS

I became unemployed or began working less than 30 hours per week on _____.

If granted, the unemployment deferment will defer repayment of your Perkins Loan for **6 months** while you are unemployed. A new form may be submitted after that time, as a new request, for a combined maximum of **36 months** over the entire term of the loan repayment.

Please select the reason(s) for your deferment request:

I am diligently seeking, but unable to find full-time employment in the United States.

I am eligible for unemployment benefits and I have attached documentation of my eligibility for these benefits.

I UNDERSTAND THAT:

To maintain my eligibility for unemployment deferment, I must be diligently seeking and unable to find full-time (30 hours or more per week) employment within the United States in any field or at any salary or responsibility level.

I will need to re-apply for this deferment every **6 months** if I wish to extend the deferment period.

After my deferment I will have a 6 month grace period, and then my repayment will come due.

BORROWER CERTIFICATION

I certify that all statements above are true and correct. If necessary for approval of this deferment, I hereby authorize the University of Denver permission to verify and confirm information which I have furnished above. I understand that it is my responsibility to notify Student Debt Management at the University of Denver to any changes in my circumstances as stated above. I will also notify them of any changes to my name, social security number, address, phone number or email address.

Borrower Signature Date

Completed signed application may be faxed, emailed, or mailed to the University of Denver Bursar's Office at address above.

OFFICE USE ONLY

Reviewed By _____ Date _____
Approved _____ Not Approved _____ From _____ To _____