10/	OI.	1.1	74
VV	อเ	JI	U#

FINANCIAL HARDSHIP DEFERMENT REQUEST

FEDERAL PERKINS /NATIONAL DIRECT STUDENT LOANS

I request a deferment on my Federal Perkins/National Direct Student Loan(s). I understand that all information and supporting documents given may be disclosed outside this institution for the purpose of verifying my financial status. This information will be used in conjunction with a commercial credit report to evaluate my financial status and ability to repay my student loan(s); and also to determine whether a request for waiver, compromise or other relief should be granted. Disclosure is voluntary. However, if this information is not furnished, decision as to further collection or disposition action will be made on the basis of the available evidence on record. I understand that if granted, this reduction of scheduled payments may be granted at intervals of up to 12 months for periods that collectively do not exceed three (3) years. I further understand that interest continues to accrue during this period, for a forbearance.

Name	Social Security Number			
Present AddressStateZip	Date of Birth			
CityStateZip	Status () Single () Engaged () Married			
Telephone: (Home) (Work)	() Separated () Divorced () Widow(er)			
Spouse's Full Name	Other Dependents: Name/Relationship Ag			
Spouse's Soc. Sec. No Date of Birth				
Spouses AddressStateZip				
StateZip				
SI	ECTION II – EMPLOYMENT			
Date Continuous Unemployment Began Na	ame & Address of Employer (list last employer if unemployed)			
Check and complete one of the items below:	mployer			
) I have never been employed. Ac	ddressStateZip			
) I have received the maximum allowable unemployment. Ci	ityState Zip			
benefits, Te	elephone ()			
() I did not work long enough to be eligible for unemployment benefits				
() I am receiving weekly unemployment benefits of \$				
	SECTION III – INCOME			
AVERAGE MONTHLY INCOME	SELF SPOUSE			
Monthly Gross Salary (before payroll deductions) - Please	\$			
enclose copies of most recent payroll earning statements.				
Total Deductions (income taxes, social security, retirement,	\$			
insurance, etc.)	¥			
Net Take Home Pay (Subtract deductions from gross salary)	\$			
Other Income (specify)	\$ \$			
TOTAL MONTHLY NET INCOME	\$			
SECTION	IV EXPENSES AND CREDITORS			
AVERAGE MONTHLY EXPENSES	CREDITORS			
Rent or Mortgage (circle one) \$	List creditors you are required to pay in regular installments,			
Rent or Mortgage (circle one) \$Utilities (include gas, electric, water, \$	such as auto loan, credit cards, finance companies, doctor			
(telephone, cable TV, HBO, etc.)	bills, hospital bills, etc. DO NOT INCLUDE LIVING			
Food \$	EXPENSES.			
Clothing	Creditor's Name Account Balance Monthly Payment			
Transportation (gas and repairs) \$	S. Solids o Harris Adocum Dalance Worlding Payment			
Other (Specify)\$				
\$				
\$				
\$				
\$				
	TOTAL EXPENSES TO OPERATORS			
TOTAL MONTHLY EXPENSES \$	TOTAL EXPENSES TO CREDITORS \$			

postsecondary educational loan(s), please include supporting documentation indicating you have been granted an

Economic Hardship Deferment.

	WSU ID#							
		SECTION	/ – FINANCIAL STATUS					
Savings Account Balance \$ Total Monthly Income (use totals			n Section	n III \$				
	Name of Bank include spouse's income)							
	Account Number Total Monthly Expenses & Creditors (include \$							
	ame of Bank	totals in Section IV) Balance (subtract expenses from income) \$						
	ccount Number		How much of the balance can you apply to					
	ash on Hand:	\$	your student loan(s) on a monti		? \$			
A	lable Cash/add savings 9 shocking	¢.	If your total monthly expenses exc income, how do you plan to pay the			ily net		
	lable Cash(add savings & checking ccount balance plus cash on hand)	Φ	income, now do you plan to pay ti	ie dinere	ince r			
		SECTION VI -	GENERAL INFORMATION					
Sinc	e your termination of student status	at Washington State Univers	ity on			, have you been:		
(a)	Employed as a full-time teacher in a lf yes, please list name of school(s)			() Yes	() No		
(b)	Enrolled at Washington State University yes, please list name of institution		higher education?	() Yes	() No		
(c)	A member of the Peace Corps, Vis If yes, please list the branch and d		eer in a tax-exempt organization?	() Yes	() No		
(d)	Serving a required internship prece If yes, list profession dates and pla			() Yes	() No		
(e)	Do you have any Federal Perkins/NIf yes, please give name of institution		outstanding at another institution?	() Yes	() No		
	Amount of Loan \$	Are you makii	ng regular payments on this loan? \$ () Weekly	() Yes	() No		
	Balance of Loan \$	Amount Paid	\$ () Weekly	()	Monthly	() Quarterly		
	7	SECT	ION VII – REMARKS					
Plea	ase respond to each of the following.	(attach additional sheets if r	necessary)					
1.	Why are you unable to maintain the	e required payment schedule	of \$ per (circle or	e) month	n/quarter?			
1	,	- · - , - · · · · · · · · · · · · · · · · · ·	po. (o	,				
2.	How do you propose to bring your	oan(s) up-to-date?						
	The second of th							
3.	When will Washington State Unive	rsity receive payment?						
 Please use this space to convey any pertinent information or extraordinary circumstances that you feel would have a bearing on your request for a reduction of scheduled payments. 								
		SECTIO	N VIII - CERTIFICATION					
BE	ERTIFY THAT ALL STATEMENTS I LIEF. I ALSO CERTIFY THAT I WII BNIFICANT CHANGE IN MY FINAN	L IMMEDIATELY NOTIFY T						
Sig	nature of Borrower		Di	ate				
Ple	ease return this completed form to	University Rece 342 French Adn	te University ivables - Student Loans iinistration Building					
		PO Box 641039 Pullman WA 99	164-1039					
		, dilitiali WA 95			Re	evised 04-27-05		