

## **In School Deferment Request Form - INSTITUTIONAL LOANS**

### **Section 1: BORROWER INFORMATION**

Check this box if any of your information has changed.

Name: \_\_\_\_\_ UMID or Last 4 Digits of SSN#: \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_ Email \_\_\_\_\_

### **Section 2: BORROWER DETERMINATION OF ELIGIBILITY (Carefully read the entire form before completing it.)**

You are eligible for this deferment when you are enrolled at least half time in an eligible school. To receive an in-school deferment for a University of Michigan Institutional Loan, the borrower must be enrolled as a regular student in an eligible institution of higher education or a comparable institution outside the United States approved by the Department for deferment purposes. A regular student is one who is enrolled for the purpose of obtaining a degree or certificate.

### **SECTION 3: BORROWER REQUESTS, UNDERSTANDINGS, CERTIFICATION AND AUTHORIZATION**

**I request:**

- To defer repayment of my loan for the period during which I meet the eligibility criteria outlined in Section 2 and as certified by the authorized official in Section 4.

**I understand that:**

- I am not required to make payment of loan principal or interest during my deferment.
- My deferment will begin, as certified by the authorized official on the date I became eligible for the deferment.
- My deferment will end, as certified by the authorized official, on the date I no longer qualify for the deferment.
- I will receive a 6-month post-deferment grace period beginning on the date I no longer qualify for the deferment.

**I certify that:**

- The information I have provided on this form is true and correct.
- I will provide additional documentation to the University of Michigan, as required, to support my deferment eligibility.
- I will notify my loan holder immediately when my eligibility for the deferment ends.

**I authorize** the University of Michigan to contact me regarding my request or my loans at any telephone number that I provide now or in the future.

**Borrower's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**By Checking this Box, I attest that this is my signature**

### **Section 4: AUTHORIZED OFFICIAL'S CERTIFICATION**

**Note:** As an alternative to completing this section, you may attach separate documentation from an authorized official that includes all of the information requested below.

- |  |  |
|--|--|
| <ul style="list-style-type: none"> <li>• The Student is/was enrolled at the school below:                     <ul style="list-style-type: none"> <li><input type="checkbox"/> Full time</li> <li><input type="checkbox"/> At least half time, but less than full time</li> </ul> </li> <li>• Is the student enrolled at the school below as a regular student?                     <ul style="list-style-type: none"> <li><input type="checkbox"/> Yes</li> <li><input type="checkbox"/> No</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• The student's enrollment status begins/began on: _____</li> <li>• The student's enrollment status ends/ended on: _____</li> <li>• The student is expected to complete his/her program requirements on: _____</li> </ul> |
|--|--|

**I certify, to the best of my knowledge and belief,** that the information that I have provided in this section is accurate.

Name of School \_\_\_\_\_ OPEID \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Official's Name/Title \_\_\_\_\_ Telephone \_\_\_\_\_

**Official's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Processed by \_\_\_\_\_ Date \_\_\_\_\_