

# DEFERMENT APPLICATION: NONPROFIT CHILD SVC OR FAMILY SVC AGENCY

## **PART 1: To be completed by the borrower.**

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 \_\_\_\_\_

## **PART 2: To be completed by the borrower's supervisor.**

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 on the letterhead for the organization

For Institutional Use Only

Time Deferred \_\_\_\_\_

Official Name \_\_\_\_\_ Date processed \_\_\_\_\_

Official Name \_\_\_\_\_ Date processed \_\_\_\_\_