

Direct Loans

William D. Ford Federal Direct Loan Program

Unemployment Deferment Request

William D. Ford Federal Direct Loan Program
 Federal Direct Stafford/Ford Loans, Federal Direct Unsubsidized Stafford/Ford Loans, Federal Direct PLUS Loans, Federal Direct Consolidation Loans

OMB No. 1845-0011
 Form Approved
 Exp. Date 07/31/2001

UNEM
 Unemployment

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

Borrower's Information

Please print legibly using blue or black ink.

Last Name	First Name	Middle Initial	Social Security Number
Street Address			Home Area Code/Telephone Number ()
City	State	Zip Code	

Section 1: Deferment Request

Must be completed by borrower. See definitions and eligibility criteria on the back of this form.

I meet the qualifications stated on the back of this form for an Unemployment Deferment and request that the U.S. Department of Education (ED) defer repayment on my loan(s) beginning (MM-DD-YYYY) while I am unemployed. Maximum cumulative eligibility is 36 months. All borrowers must re-apply every six months.

To document eligibility, the following must be completed:

- (1) I became unemployed or began working less than 30 hours per week on (MM-DD-YYYY)
- (2) Check one: I registered with the following public or private employment agency on _____.

(Please print or type. School placement offices and "temporary" agencies do not qualify as public or private employment agencies.)

Name of Employment Agency	Address (City, State, Zip Code)	Area Code/Telephone Number
---------------------------	---------------------------------	----------------------------

I am not registered with an employment agency because there is not one within 50 miles of my permanent or temporary address.

- (3) In the last six months, I have attempted to secure full-time (see Definitions) employment at the following six firms. This is not required for initial period of unemployment. However, for subsequent requests for deferment, all six sections must be completed. (A copy of the information provided to the Unemployment Insurance Service may be substituted for completion of the six sections below. This must, however, show the same number of contacts and contain the same information.)

1. Name of Firm _____
 Street _____
 City _____ State _____ Zip _____
 Contact Person (Name or Title) _____
 Telephone () _____

2. Name of Firm _____
 Street _____
 City _____ State _____ Zip _____
 Contact Person (Name or Title) _____
 Telephone () _____

3. Name of Firm _____
 Street _____
 City _____ State _____ Zip _____
 Contact Person (Name or Title) _____
 Telephone () _____

4. Name of Firm _____
 Street _____
 City _____ State _____ Zip _____
 Contact Person (Name or Title) _____
 Telephone () _____

5. Name of Firm _____
 Street _____
 City _____ State _____ Zip _____
 Contact Person (Name or Title) _____
 Telephone () _____

6. Name of Firm _____
 Street _____
 City _____ State _____ Zip _____
 Contact Person (Name or Title) _____
 Telephone () _____

Borrower Understandings and Certifications

I understand that: (1) My deferment will begin on the date the deferment condition began but no more than six months before the date ED receives this request; (2) My deferment will last for no more than six months after the date ED receives this request; (3) ED will not grant this deferment request unless all applicable sections of this form are completed; (4) Principal payments will be deferred, but if my loan(s) is not subsidized by the federal government, I am responsible for paying the interest that accrues; (5) If I do not choose to pay all interest that accrues during my deferment period, ED will capitalize (see Definitions) such interest to the extent permitted by law. This will increase the principal balance of my loan(s); (6) If my deferment does not cover all my past due payments, ED may grant me a forbearance for all payments due before the begin date of my deferment.

I certify that: (1) The information provided in Section 1 above is true and correct; (2) I will provide additional documentation, as required, to ED to support my continued deferment status; (3) I will notify ED immediately when the condition(s) that qualified me for the deferment ends; and (4) I have read, understand, and meet the terms and conditions of the deferment for which I have applied as explained on the back of this form.

Signature of Borrower _____ Date _____

Section 2: Definitions/Eligibility Criteria for Unemployment Deferment Request

Definitions

- A **deferment** is a period during which I am entitled to postpone repayment of the principal balance of my loan(s). Interest does not accrue during an eligible deferment on Federal Direct Stafford/Ford Loans (Direct Subsidized Loans) or Federal Direct Subsidized Consolidation Loans (Direct Subsidized Consolidation Loans). I am responsible for the interest that accrues during this period on all other William D. Ford Federal Direct Loan (Direct Loan) Program loans.
- **Full-Time** employment is defined as working at least 30 hours per week in a position expected to last at least three months.
- **Capitalization** is a process whereby ED adds unpaid interest to the principal balance of a loan(s).

Eligibility Criteria

- I may **defer** (postpone) repayment of my loan(s) while I am **UNEMPLOYED**. Maximum cumulative eligibility is 36 months. All borrowers must re-apply every six months.

To qualify, I must:

- (1) be conscientiously seeking but unable to find full-time employment in the United States **in any field** or at any salary or responsibility level,
- (2) be registered with a private or public employment agency if there is one within 50 miles of my permanent or temporary address, and
- (3) provide ED with documentation of my conscientious search for full-time employment during the preceding six months (except in the case of the initial period of unemployment).

Important Notices

Privacy Act Disclosure Notice

The Privacy Act of 1974 (5 U.S.C.552a) requires that the following notice be provided to you. The authority for collecting the information requested on this form is §451 et seq. of the Higher Education Act of 1965, as amended. Your disclosure of this information is voluntary. However, if you do not provide this information, you cannot be considered for a deferment. The information on this form will be used to determine your eligibility for a deferment of repayment of your Direct Loan Program loan(s). The information in your file may be disclosed to third parties as authorized under routine uses in the Privacy Act notices called "Title IV Program Files" (originally published on April 12, 1994, Federal Register, Vol. 59, p. 17351) and "National Student Loan Data System" (originally published on December 20, 1994, Federal Register, Vol. 59, p. 65532). Thus, this information may be disclosed to federal and state agencies, private parties such as relatives, present and former employers and creditors, and contractors of the Department of Education for purposes of administration of the student financial assistance program, for enforcement purposes, for litigation where such disclosure is compatible with the purposes for which the records were collected, for use by federal, state, local, or foreign agencies in connection with employment matters or the issuance of a license, grant, or other benefit, for use in any employee grievance or discipline proceeding in which the Federal Government is a party, for use in connection with audits or other investigations, for research purposes, for purposes of determining whether particular records are required to be disclosed under the Freedom of Information Act, and to a Member of Congress in response to an inquiry from the congressional office made at your written request.

Because we request your social security number (SSN), we must inform you that we collect your SSN on a voluntary basis, but section 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) provides that, in order to receive any grant, loan, or work assistance under Title IV of the HEA, a student must provide his or her SSN. Your SSN is used to verify your identity, and as an account number (identifier) throughout the life of your loan(s) so that data may be recorded accurately.

Return this form and any required documentation to:

U.S. Department of Education
Direct Loan Servicing Center
P.O. Box 4609
Utica, NY 13504-4609

If assistance is needed in completing this form call:

1 (800) 848-0979

Individuals who use a telecommunications device for the deaf (TDD)
may call: 1 (800) 848-0983

Paperwork Reduction Notice

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0011. The time required to complete this information collection is estimated to average 0.2 hours (12 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, DC 20202-4651. **If you have any comments or concerns regarding the status of your individual submission of this form, write directly to:**

U.S. Department of Education
Direct Loan Servicing Center
P.O. Box 4609
Utica, NY 13504-4609