



# IN-SCHOOL DEFERMENT REQUEST

Warning: Any person who knowingly makes a false statement or misrepresentation on this form or any accompanying documents shall be subject to penalties which may include fines, imprisonment, or both under the U.S. Criminal Code and 20 U.S.C. S1097.

## SECTION 1: BORROWER IDENTIFICATION

Enter requested information below.

ID#    -       The University of Oklahoma

Name  STUDENT LOAN-Office of the Bursar

Address  1000 Asp Ave, Room 208

City, State, Zip  Norman, Oklahoma 73019-4072

Telephone - Home (  )  (405) 325-5876

Telephone - Other (  )

## SECTION 2: DEFERMENT REQUEST

Before answering any questions, carefully read the entire form.

I meet the qualifications for the deferment checked below and request that my loan holder defer repayment of my loan(s):

- While I am enrolled at an eligible school as a FULL-TIME STUDENT.
- While I am enrolled at an eligible school as a LESS THAN FULL-TIME BUT AT LEAST HALF-TIME STUDENT.

## SECTION 3: BORROWER UNDERSTANDINGS AND CERTIFICATIONS

I understand that:

- (1) Principal and interest will be deferred on the NDSL/Perkins Student Loan.
- (2) Principal will be deferred on the institutional loans listed below.
- (3) If I have borrowed from any of the institutional loans listed below, I am responsible for paying the interest that accrues.  
The interest may be paid monthly or paid annually on July 1, when in a deferred status.  

Lew Wentz Foundation	J. & M. Robey Foundation	Sallie B. Clark Loan
Murray Case Sells Loan	Deloe Memorial Loan	
- (4) If my deferment does not cover all my past due payments, the institution will require payment prior to approving this deferment.
- (5) The institution will not grant this deferment request unless all applicable sections of this form are completed and any required additional documentation is provided.
- (6) If deferments are filed late, the adverse payment history will be reported to the credit bureau.
- (7) The institution may deny this request for deferment.

Borrower's Signature  Date

## SECTION 4: AUTHORIZED OFFICIAL'S CERTIFICATION

NOTE: As an alternative to completing this section, the school may attach its own enrollment certification report listing the required information.

I certify, to the best of my knowledge and belief, that the borrower named above:

(1) is/was enrolled as (check the appropriate box)  a full-time student  at least a half-time student during the

academic period from  -  -  to  -  -  and

(2) is reasonably expected to complete his/her program requirements on  -  -

Name of Institution  OPE-ID

Street Address

City, State, Zip

Name/Title of Authorized Official  Telephone (  )

Authorized Official's Signature  Date

Return completed form to The University of Oklahoma at the address listed above.

**SECTION 5: FOR OFFICE USE ONLY**

Approved

Disapproved because \_\_\_\_\_  
\_\_\_\_\_

Deferment Beginning Date:    /    / \_\_\_\_\_

Deferment Ending Date:       /       / \_\_\_\_\_

Loan Representatives: \_\_\_\_\_

Date:                               /       / \_\_\_\_\_