



REQUEST FOR PARTIAL CANCELLATION KAISER EARLY CHILDHOOD EDUCATION LOAN PROGRAM

Warning: Any person who knowingly makes false statement or misrepresentation on this form or on 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

Loan # _____

Disclosure of your Social Security Number is voluntary. If you consent to disclose your Social Security Number by including it here, it will be used for identification purposes.

Name _____

Address _____

City, State, Zip _____

Telephone – Home (_____) _____

Telephone – Other (_____) _____

The University of Oklahoma
Office of the Bursar
Student Loan Services
1000 Asp Avenue, Room 208
Norman, OK 73019-4072
Phone: (405) 325-5876
Fax: (405) 325-5803

SECTION 1 – Request for Deferment (To be completed by borrower)

Organization where employed:

Name _____

Address _____

City, State, Zip _____

Description of Exact Duties (attach sheet if necessary) _____

Beginning _____ Ending _____

Signature _____ Date _____

I declare that I am employed full-time in the organization shown above. I request deferment of the principle balance in accordance with Title IV Regulations. I understand that by requesting a deferment or cancellation during my original grace period, I am conditionally waiving my rights to said grace period.

SECTION 2 – Request for Cancellation (To be completed by borrower)

Organization where employed:

Name _____

Address _____

City, State, Zip _____

Description of Exact Duties (attach sheet if necessary) _____

Beginning _____ Ending _____

Signature _____ Date _____

I declare that I am employed full-time in the organization shown above. I request deferment of the principle balance in accordance with Title IV Regulations. I understand that by requesting a deferment or cancellation during my original grace period, I am conditionally waiving my rights to said grace period.

SECTION 3 – Request for Cancellation (To be completed by Employer)

Attach a detailed job description, the job title and dates of employment on company letterhead.

Organization where employed:

Name _____

Address _____

City, State, Zip _____

Telephone (____) _____

Signature of Authorized Official _____ Date _____

Print Name of Authorized Official _____ Date _____

CRITERIA FOR KAISER CANCELLATION

For each year (twelve consecutive months) that I am employed in the state of Oklahoma in the field of early childhood education, 25 percent of my loan will be cancelled.

*ECE fields serving birth through age eight and their families.
Setting must be licensed / approved by relevant state agency.

I must present official documentation to the Student Loan office from my employer demonstrating full-time employment with my primary duty teaching in the field of early childhood education.

Principle and interest will be deferred and does not accrue.

CRITERIA FOR KAISER DEFERMENT

A half-time student.

On full-time active duty as a member of the armed forces (maximum period of deferment is four years).

Serving as a medical intern or in a medical residency (maximum period of deferment is four years).

Serving as a volunteer for the Peace Corps or Vista.

SECTION 4 – Completed by Lending Institution

Approved

Disapproved because _____

Signature of Official _____ Date _____

Principal Cancelled _____ Interest Cancelled _____

New Principal Balance _____ Payment Postponed Until _____

KAISER FOUNDATION EARLY CHILDHOOD LOAN PROGRAM

As a student loan borrower, I understand that it is my responsibility to inform the Student Loan Office of all changes of name, address, and student status. I certify that the above information is true and correct to the best of my knowledge. Declaration: I declare all information provided in the request to be accurate and true. I will notify the University of Oklahoma immediately of any change in my employment status and begin payment if required. I authorize the University of Oklahoma and their (respective agents and contractors) to contact me regarding my request or my loan (s) including repayment of my loan (s), at the number provided on this form or any future number that I provide for my cellular telephone or other wireless device using automated telephone dialing equipment or artificial or prerecorded voice or text messages.