



UNEMPLOYMENT 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

Instructions and definitions are printed on the back of this form. Enter requested information below:

SSN [] [] [] - [] [] - [] [] [] [] [] []

Name _____
Address _____
City, State, Zip _____
Telephone - Home _____
Telephone - Other _____

The University of Oklahoma
STUDENT LOAN-Office of the Bursar
1000 Asp Ave, Room 208
Norman, Oklahoma 73019-4072
(405) 325-5876

SECTION 2: DEFERMENT REQUEST

Before answering any questions, carefully read the entire form, including the instructions and other information in Sections 4, 5, and 6. I meet the qualifications stated in Section 6 for an Unemployment Deferment and request that my loan holder defer repayment of my loan(s).

To document eligibility, complete the following:

(A) TO BE COMPLETED BY ALL BORROWERS:

I became unemployed or began working less than 30 hours per week on ____/____/____. My deferment begins on this date unless I request my deferment to begin on the following later date: ____/____/____.

(B) IF YOU ARE ELIGIBLE FOR UNEMPLOYMENT BENEFITS, CHECK THIS BOX AND ATTACH THE REQUIRED DOCUMENTATION.

I am eligible for unemployment benefits. I have attached documentation of my eligibility for these benefits. The documentation includes my name, address, social security number, and the effective dates of my eligibility to receive unemployment benefits.

If you checked this box, skip to Section 3 ("Borrower Interest Selection and Certification"). Do not complete Items (C) and (D).

(C) IF YOU ARE NOT ELIGIBLE FOR UNEMPLOYMENT BENEFITS, OR IF YOUR ELIGIBILITY HAS EXPIRED, CHECK THE APPROPRIATE BOX BELOW AND PROVIDE THE REQUESTED INFORMATION:

I registered with the following public or private employment agency on ____/____/____.

Name of Employment Agency _____
Address: Street _____ Telephone () _____
City, State, Zip Code _____

NOTE: School placement offices and "temporary" agencies do not qualify as public or private employment agencies.

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

Address: Street _____ Telephone () _____
City, State, Zip Code _____

(D) COMPLETE THIS ITEM ONLY IF (1) YOU ARE REQUESTING AN EXTENSION OF AN EXISTING UNEMPLOYMENT DEFERMENT AND (2) YOU ARE NOT ELIGIBLE FOR UNEMPLOYMENT BENEFITS. IF THIS IS YOUR FIRST UNEMPLOYMENT DEFERMENT REQUEST, OR IF YOU ARE ELIGIBLE FOR UNEMPLOYMENT BENEFITS, SKIP TO SECTION 3 ("BORROWER CERTIFICATION"). A SECOND PAGE IS ATTACHED, IF YOU NEED TO COMPLETE (D).

SECTION 3: BORROWER CERTIFICATION

Principal payments will be deferred. I am responsible for paying the interest that accrues on Lew Wentz, Murray Case Sells, J.M. Robbey, Sallie B. Clark, and Deloe Memorial Loans. I have the option of making interest payments during the deferment. The unpaid interest that accrues will be due at the end of the deferment period or on July 1st, whichever comes first.

I certify that the information I have provided in Sections 1 and 2 above is true and correct, and that I have read, understand, and meet the eligibility criteria and terms and conditions of the deferment for which I have applied, as explained in Section 6.

Borrower's Signature _____ Date _____

SECTION 4: INSTRUCTIONS FOR COMPLETING THE FORM

Type or print using dark ink. Report dates as month-day-year (MM-DD-YYYY). For example, 'January 1, 1999' = '01-01-1999'. If you need more space to provide any of the information requested in Section 2, continue on separate sheets of paper attached to this form. Indicate the number of the item for which you are providing information, and include your name and social security number (SSN) on all attached sheets. If you need help completing this form, contact your loan holder.

Return the completed form and any required documentation to the address shown in Section 1.

SECTION 5: DEFINITIONS

- * A deferment is a period during which I am entitled to postpone repayment of the principal balance of my loan(s).
- * Forbearance means permitting the temporary cessation of payments, allowing an extension of time for making payments, or temporarily accepting smaller payments than previously scheduled. I am responsible for paying the interest on my loan(s) during a forbearance.
- * Full-time employment is defined as working at least 30 hours per week in a position expected to last at least three months.

SECTION 6: ELIGIBILITY CRITERIA / TERMS AND CONDITIONS FOR UNEMPLOYMENT DEFERMENT

I may defer (postpone) repayment of my loans while I am unemployed.
If my first loans were made on or after July 1, 1993, my maximum cumulative eligibility is 36 months.

- * To qualify:
 - (1) I must be conscientiously seeking but unable to find full-time employment in the United States in any field or at any salary or responsibility level. (The United States includes the 50 states, the District of Columbia, Puerto Rico, American Samoa, Guam, the Trust Territory of the Pacific Islands, the Virgin Islands, the Commonwealth of the Northern Mariana Islands, and U.S. military bases and embassy compounds in a foreign country).
 - (2) I must provide documentation establishing that I am eligible for unemployment benefits. This documentation must include my name, address, social security number, and the effective dates of my eligibility to receive unemployment benefits.

OR

 - (3) If I am not eligible for unemployment benefits, I must be registered with a private or public employment agency if there is one within 50 miles of my permanent or temporary address (school placement offices and "temporary" agencies do not qualify as public or private employment agencies). If I am not eligible for unemployment benefits and I am requesting an extension of an existing unemployment deferment, I must provide my loan holder with documentation of my conscientious search for full-time employment in the preceding six months by completing item (D) in Section 2 of this form.
- * I will provide additional documentation to my loan holder, as required, to support my deferment status.
- * I will notify my loan holder immediately when the condition(s) that qualified me for the deferment ends.
- * My deferment will begin on the date the deferment condition began, but no more than six months before the date my loan holder receives this request.
- * My deferment will end on the earlier of the date that the condition that establishes my deferment eligibility ends or the certified deferment end date.
- * My loan holder will not grant this deferment request unless all applicable sections of this form are completed and any required additional documentation is provided.
- * If my deferment does not cover all my past due payments, my loan holder may grant me a forbearance for all payments due before the begin date of my deferment or - if the period for which I am eligible for a deferment has ended - a forbearance for all payments due at the time my deferment request is processed.

SECTION 7: FOR OFFICE USE ONLY

Approved

Disapproved because _____

Deferment Beginning Date: ____ / ____ / ____ Deferment Ending Date: ____ / ____ / ____

Eligibility Remaining: _____

Collection Representative: _____

Date: ____ / ____ / ____

Return this form to the University of Oklahoma at the address listed in section 1.

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Borrower's Name _____ Account: _____

SECTION D

In the last six months, I have attempted to secure full-time employment with the following six employers:

Employer _____
Street _____
City, State Zip _____
Contact (Name or Title) _____
Telephone () _____

Employer _____
Street _____
City, State Zip _____
Contact (Name or Title) _____
Telephone () _____

Employer _____
Street _____
City, State Zip _____
Contact (Name or Title) _____
Telephone () _____

Employer _____
Street _____
City, State Zip _____
Contact (Name or Title) _____
Telephone () _____

Employer _____
Street _____
City, State Zip _____
Contact (Name or Title) _____
Telephone () _____

Employer _____
Street _____
City, State Zip _____
Contact (Name or Title) _____
Telephone () _____