## THE UNIVERSITY OF TENNESSEE AT CHATTANOOGA

## FEDERAL PERKINS (NDSL) STUDENT LOAN POSTPONEMENT/DEFERMENT AND CANCELLATION REQUEST PART I

Name of Borrower		Home Phone ( )	
Name of Borrower			
Address (street, apt. no.)		Cell Phone ()	<u></u>
City, State, Zip		Work Phone ()	
Email Address		Soc. Sec. Number	
Name of School, Employer, Volunteer Organization			
PART II			
A. Check ONE of the full-time employment/volunteer cancellations listed below:    Full-time Nurse, Medical Technician/Allied Health, Firefighter (providing Health care Services)(100%)   Full-time Provider of early intervention services (100%)     Full-time Law Enforcement/Corrections Officer or Public Defense Lawyer (100%)   Full-time faculty at Tribal College or University (100%)     Full-time Military serving in Hostile Area before Aug 14, 2008 (50%), serving after Aug 8, 2008 (100%)   Full-time Peace Corp/Action Volunteer (70%)     Full-time Teacher in public non-profit elem. Or secondary school system (100%)     Full-time Special Education or handicapped Teacher in public non-profit elem. Or secondary school (100%)     Full-time Head Start, Pre-Kindergarten or Child Care Program Staff that is licensed or regulated by the state (100%)     Full-time Librarian with master's degree and working in Title I eligible school or public library serving a Title I school (100%)     Full-time Teacher in mathematics, science, foreign languages, bilingual, or in shortage area as determined by state education agency (100%)     Full-time Child or Family Service Agency or Speech Pathologist with master's degree and working exclusively in Title I eligible schools (100%)     B. Give job title and brief statement of duties (Employer must attach copy of job duties)			
C. School/employing agency (check type)  E. Certification of Employment/Military Benef			d. Borrower must obtain proper
1. □ Public (non-profit) □ Private non-profit  Is your employer a public funded school/agency? □ Yes □ No  If yes, what source? □ local □ State □ Federal		Certification from employer or service unit before eligibility can be determine.  Name of School, Place of Employment or Service Unit	
Legal Name of School/Employing Agency			
County School District (This line for teachers only.)		Address Phone No.	
City State Zip		City State Zip	
Benefit /Employment Period Certifying Official must Initial Altered Dates  2.  Postponement/Deferment Beginning and Ending (Borrower Must Fill in Dates)///  2. A Med Tech/RN Lic. Date/// Enclose copy of certificate and license if not on file in our office  3.  Cancellation (Borrower Must Fill in Dates) Beginning and Ending///  3.A Teachers only check one   will teach next school year to		Certifying Official must CHECK ONE box below and one area of employment:    certify employee is a registered, licensed or certifiedNursMed Tech (specify type)   certify employee is aLawCorrectionProbation OfficerFirefighter (check one)   certify employee is a provider of early intervention services; the majority are children   certify that this is a publicHead StartElementaryMiddleHigh School.   certify that this is a non-profit elementary or secondary school registered by the State Education Agency (Letter of registration must be attached by certifying Official.)   certify that this is a public/private non-profit child or family services agency (for low income families only)   certify that employee is inPeace CorpsAction ProgramMilitary Hostile Area  By signing this form, you certify the employment/volunteer information stated in A-D is true and correct.	
		Signature of Certifying Official  Print Name of Certifying Official	If not available, an official letter of certification is required. Form will not be processed if omitted
SIGNATURE OF BORROWER REQUIRED:	Date:	Title of Certifying Official	
		Date	
PART III Completed By UTC Official Only		Loan Type Cancellation Type Total Cancelled	
			☐ 1st year - 15% ☐ 5th year - 30%
☐ Approved ☐ Approved		Principal Cancelled  Interest Cancelled	☐ 2nd year - 15% ☐ Head Start - 15% ☐ 3rd year - 20% ☐ 12% per year
		New Loan Balance \$	☐ 4th year - 20%
Completed By: Title:			Date: