

Colorado State University Perkins and HPSL Forbearance Application

Forbearance: Under the terms and conditions of forbearance, principal is deferred for six months in order to relieve your financial situation. At the end of the forbearance period, your regular monthly payments will resume. Interest does accrue on your principal balance while your account is in forbearance. Your accrued interest will be due at the end of your six month forbearance term unless you indicate in writing that you would like to pay your accrued interest monthly.

All late fee charges must be paid before you can qualify. Please call (970) 491-6467 for your account balance.

Forbearance Terms and Conditions

I do hereby agree to the Terms and Conditions of forbearance for my Perkins (NDSL) and Health Professions Loan with Colorado State University.

I understand that:

- If I qualify, I will be granted forbearance for up to six months.
- Principal payments are not due during forbearance, but interest will continue to accrue each month at 5% APR.
- Unless I indicate in writing that I would like to pay the interest during the period of forbearance, I will pay the interest at the end of my forbearance.
- It is my responsibility to keep Student Loans Receivable updated on my financial situation and current address.
- I can receive up to 3 years cumulative maximum of forbearance. If I choose to, I can notify Colorado State University to end my forbearance early and resume repayment in order to reserve my remaining forbearance for future use.
- If I am unable to resume my regular monthly payments when my forbearance expires, I can apply for additional forbearance if I have paid the accrued interest.
- *Health Professions Loan Only:* I understand that periods of forbearance are counted as part of the 10 year repayment period. Therefore, upon expiration of this forbearance my monthly payment amount may be adjusted so the repayment period does not exceed the 10 year limitation.

Signature

Date

Forbearance Checklist

To grant a forbearance request we must receive all required information. Carefully review the checklist below as it lists all the documentation you are required to submit. We will be unable to review your request if your application is incomplete.

- () Payment of all outstanding late fees (Required)
- () Statement of Financial Condition (Enclosed and Required)
- () Completed Forbearance Terms and Conditions Agreement (Enclosed and Required)
- () Letter explaining your financial situation and request (Required)
- () Copy of your most recent tax return or W2 (Required)
- () Salary verification, i.e. copy of last pay stub (Required)
- () Unemployment Verification, i.e. copy of unemployment benefits, letter from previous employer, registration with job service (If Applicable, Required)
- () Verification of all monthly expenses, i.e. copies of all monthly bills (Required)
- () Documentation of other student loans, i.e. copies of payment amounts, or proof that loans are in forbearance or deferment.
- () Physician's documentation of disability and its duration (If Applicable, Required)
- () Verification of Welfare benefits (If Applicable, Required)
- () Social Security Benefits (If Applicable, Required)
- () Other documentation that will help determine your current financial situation, i.e. medical, legal

We are unable to accept faxed applications. Mail your application to:

CSU, Account Receivable Operations
6024 Campus Delivery
Fort Collins, CO 80523

Statement of Financial Condition Form

First Name	Last Name	M.I.	Loan Number
Address	City	State	Zip
Student ID Number	Birth Date		
Day Phone	Evening Phone		

I request a forbearance deferment of my Federal Perkins (NDSL) Loan or Health Professions Loan. I understand that interest continues to accrue during the forbearance deferment and must be paid on a monthly basis. I understand that all information and supporting documents given will be held in the strictest of confidence and will not be subject to dissemination outside the requirement of CSU.

1.) Status (check one): Single Married Widow(er) Separated / Divorced

2.) Dependents:

Relationship _____	Age _____	Relationship _____	Age _____
Relationship _____	Age _____	Relationship _____	Age _____
Relationship _____	Age _____	Relationship _____	Age _____

3.) Checking Account:
Average monthly balance \$ _____

Bank Name	Bank Address
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4.) Savings Account:
Average monthly balance \$ _____

Bank Name	Bank Address
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5.) Employer: (if unemployed, list previous employer)

Name	Address	Phone Number
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6.) Date Continuous Unemployment Began _____

7.) Gross Income per Year \$ _____

8.) Monthly Income:

Gross Salary	\$ _____	
Net Salary or Commission	\$ _____	
Unemployment Benefits	\$ _____	
Spouse's Net Monthly Income	\$ _____	
Public Assistance	\$ _____	
Alimony and Child Support	\$ _____	
Other Income	\$ _____	Describe: _____

Total Monthly Income: \$ _____

9.) Monthly Expenses:

CSU Student Loans	\$ _____	
Other Student Loans (see #10)	\$ _____	
Food / Groceries	\$ _____	
() Rent or () Mortgage	\$ _____	
Food / Eating out	\$ _____	
Utilities (including phone)	\$ _____	
Child Care	\$ _____	
Medical & Dental	\$ _____	
Automobile Payment(s)	\$ _____	
Auto (gas, oil, repairs)	\$ _____	
Insurance	\$ _____	
Other Mo. Expenses (see #11)	\$ _____	Describe: _____

Total Monthly Expenses: \$ _____

10.) Student Loans:

Lender	Balance Owed	Monthly Payment
	\$	\$
	\$	\$
	\$	\$

Total Monthly Student Loan Payment(s): (from this section) \$ _____

11.) Other Debts: (Credit cards, etc)

To Whom You Owe Money	Balance Owed	Monthly Payment
	\$	\$
	\$	\$
	\$	\$

Total Other Monthly Payment(s): (from this section) \$ _____

I request a special arrangement on my past due financial obligation(s). If granted, I understand this arrangement is temporary and subject to periodic reevaluation. I agree to submit supporting documentation, if requested.

I understand that the purpose of this information is to assist in finding a repayment plan best suited for me. You may discuss my financial obligation(s) with any concerned "third party" to verify the above information.

I understand that interest and / or late and service charges continue to accrue under normal University and / or federal regulations regardless of this agreement. I also understand that Colorado State University's Student Loans Receivable Office is a member of national credit bureaus and that information pertaining to my financial obligation(s) may be reported to them.

I certify that all statements made above are true and correct. I also certify that I will immediately notify Colorado State University Student Loans Receivable Office of any change in employment status, address, or financial situation.

Signature _____

Date _____

Return form and attachments to:
 Colorado State University
 Student Loans Receivable
 6024 Campus Delivery
 Fort Collins, Colorado 80523-6024

<input type="checkbox"/> Declined	Comments: _____ _____
<input type="checkbox"/> Approved	From: _____ To: _____