



Return Completed Forms to:
University Accounting Service
PO Box 918
Brookfield, WI 53008
Tel: 800-999-6227 | Fax: 866-543-6814
Email: uasloanservice@ncogroup.com

TUFTS LOAN DEFERMENT / FORBEARANCE REQUEST FORM

SECTION 1: BORROWER INFORMATION

Please print the following information:

Name: _____ Last four digits of SSN: _____
Address: _____
City, State, Zip: _____
Phone Home: _____ Phone Other: _____
E-mail Address: _____
UAS Loan Account Number(s): _____

SECTION 2: DEFERMENT / FORBEARANCE REQUEST

Please check the appropriate box below:

Note: As stated in your promissory note, a school deferment and internship/residency deferment is only applicable on Dental and undergraduate Institutional loans disbursed on/after July 1, 2007 and Veterinary and Medical school loans disbursed on/after July 1, 2008. All loans disbursed prior to dates specified above are only eligible for a forbearance.

I am enrolled FULL-TIME in a degree program at _____
(Please complete section 3 and have section 4 certified)

I am serving an eligible INTERNSHIP / RESIDENCY at _____
(Please complete section 3 and have section 5 certified)

I am seeking a FORBEARANCE on my Tufts loan(s). (Please complete section 3 and 6)

SECTION 3: BORROWER CERTIFICATIONS

I understand that:

1. I am not required to make principal payments during this deferment/forbearance period. Interest accrued during this time, will be capitalized and added to the principal balance at the end of my deferment period, thereby increasing my total loan amount.
2. I may choose to make timely interest only payments monthly by checking the box below.
 I wish to make monthly interest only payments during this deferment/forbearance period.
3. This benefit is to be granted to me for no more than twelve (12) months at a time. I am responsible for applying annually for this deferment/forbearance.
4. The maximum cumulative eligibility for a full time school and an internship/residency deferment is sixty (60) months. The maximum cumulative eligibility for a forbearance is thirty-six (36) months.

■ **I certify that:** (1) The information I provided in sections 1 and 2 is true and correct. (2) I will provide additional documentation to Tufts University, if required, to support my deferment/forbearance status. (3) I will notify Tufts University immediately if the condition(s) that qualified me for this deferment ends. (4) I will notify Tufts University of any change in my name, address, and/or phone number. (5) I authorize a representative of Tufts University to obtain pertinent information from applicable parties for verification purposes.

Borrower's Signature: _____ **Date:** _____

SECTION 4: REGISTRAR CERTIFICATION (for school deferment)

NOTE: As an alternative to completing this section, the school may attach its own enrollment verification form.

I certify, to the best of my knowledge and belief, that _____
(name of student)

is/was enrolled as a full-time student during the academic period from _____ to _____

Anticipated Graduation date: _____

Name of Institution _____ OPE-ID: _____

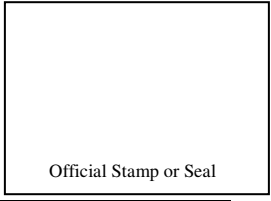
Address: _____ City, State, Zip: _____

Name/Title of Authorized Official: _____

Phone: _____

Authorized Signature: _____

Date: _____



SECTION 5: AUTHORIZED OFFICIAL'S CERTIFICATION (for internship/residency deferment)

NOTE: As an alternative to completing this section, an authorized official may attach an enrollment verification form.

I certify, to the best of my knowledge and belief, that _____
(name of intern/resident)

is engaged in his/her residency/internship from _____ to _____

Name of Institution: _____

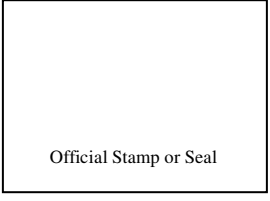
Address: _____ City, State, Zip: _____

Name/Title of Authorized Official: _____

Phone _____

Authorized Official's Signature: _____

Date: _____



Mail or fax this application to:

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SECTION 6: REQUIRED FOR A FORBEARANCE REQUEST

I currently have Federal Loans in an approved economic hardship deferment or forbearance.
 (please attach documentation of this benefit as an alternative to completing questions 1-6 below)

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

2. Number of Dependents: _____

3. Monthly Income and Expenses:

Monthly Income	Total
Spouse's Net Monthly Income	\$.
Other Income:	\$.
Total Income	\$.
Monthly Expenses	Total
Rent/Mortgage	\$.
Internet	\$.
Utilities	\$.
Groceries	\$.
Student Loans	\$.
Credit Cards	\$.
Car Payments	\$.
Insurance	\$.
Cell Phone	\$.
Public transportation	\$.
Gas	\$.
Miscellaneous	\$.
Total Expenses	\$.
Total Income - Total Expenses	\$.

4. Assets:
 Total Checking/Savings Account Balance: \$ _____

5. Employment Status:

Unemployed (please attach documentation of benefits)

Employed (provide information for current/most recent employer)

Employer Name: _____ Phone: _____

6. Briefly describe your financial situation:

I understand that all information and supporting documents submitted will be held in strictest confidence and will not be subject to dissemination outside the requirements of Tufts University. I further understand that this arrangement will consist of reduced or deferred payments, as determined by Tufts University based on my financial situation. It may be necessary to make accelerated payments at the expiration of this arrangement to repay the loan within the maximum repayment period.

I certify that all statements are true and correct. I also certify that I will immediately notify Tufts University of any change in my employment status or significant change in my financial situation.

Mail or fax this application to: _____ Borrower Signature _____ Date _____

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