



## Economic Hardship/Unemployment Deferment

I understand this application must be completed, signed and returned to Student Financial Services within thirty (30) days. Information that requires supporting documentation (proof) will be notated. **IF THE REQUIRED DOCUMENTATION IS NOT SUBMITTED WITH THE DEFERMENT APPLICATION, THE APPLICATION WILL BE DENIED.**

### Borrower Information:

Name (first, middle initial, last)	Penn State ID Number
Current mailing address (street, apartment or P.O. Box number, city, state, ZIP code, country)	Phone (include area code)
Current email address	Cell phone (include area code)

### Employment History:

Are you currently unemployed? Yes  No  If no, please provide copy of your unemployment card or tax return.

Hours employed per week:  
If you are working less than 40 hours per week, are you seeking full-time employment? Yes  No

Are you currently receiving payment under a federal or state public assistance program, such as Aid to Families with Dependent Children, Supplemental Security Income, Food Stamps, or state general public assistance? Yes  No   
(if applicable, please provide documentation).

Have you been granted an economic hardship deferment on your Federal Stafford Student Loan? Yes  No   
If yes, please provide documentation.

Employer's Name	Phone (include area code)
Job Description	Beginning/Ending Dates
	Monthly Net Income

### Personal References: (Individuals who do not have the same address/telephone as you or the other reference).

Name (first, last)	Phone (include area code)
Address (street, apartment or PO Box number, city, state, ZIP code, country)	
Name (first, last)	Phone (include area code)
Address (street, apartment or PO Box number, city, state, ZIP code, country)	

**Dependents:**

Name (first, last)	Relationship
Name (first, last)	Relationship
Name (first, last)	Relationship
Name (first, last)	Relationship

**Income: (verification required for all sources of income)**

Your <u>net</u> monthly income	Your <u>gross</u> monthly income	Other income	Other income (source)
Checking account balance	Savings account balance		

**Expenses:**

Rent/Mortgage	Food	Utilities	Internet
Auto payment	Auto fuel	Auto insurance	Life insurance
Health insurance	Cell phone	Child support	Other expenses
Credit cards (minimum payment)	Educational loans (monthly)	Personal loans (monthly)	Other loans (monthly)

**Additional comments that will be helpful in rendering a decision:**

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I understand that anyone making a false statement or false representation of material fact to avoid payment of an obligation under the Federal Perkins/Perkins/National Direct Student Loan Program may be subject to serious consequences.

I affirm that the above statements are true and correct. I understand that a **FAILURE TO PROVIDE REQUESTED INCOME/EXPENSE VERIFICATION WILL RESULT IN THE DENIAL OF MY DEFERMENT REQUEST.**

Signature	Date