

## FEDERAL PERKINS LOAN PROGRAM – DEFERMENT REQUEST DUE TO UNEMPLOYMENT

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to a fine of no more than \$10,000 or imprisonment for not more than five years or both, under the provision of Sec. 20 U.S.C. 1097.

## A. BORROWER INFORMATION

The following documentation is required to be attached and submitted with this application in order to process the request for deferment due to unemployment. Final responsibility for completion and return of this form and documentation rests solely with the borrower.

- Documentation of your last date of employment. (i.e. pay stub).
- Letter from your previous employer stating your last day of employment.

Note: An institution may permit a borrower to defer payments on his/her Perkins Loan if the borrower is seeking, but unable to find, full-time employment. Full-time employment is defined as working at least 30 hours per week in a position which is expected to last at least three months. The normal length of an unemployment deferment is three (3) months.

## B. REQUEST FOR DEFERMENT OF REPAYMENT (To be completed by the borrower)

| Name            |  |       | LSU ID |              |
|-----------------|--|-------|--------|--------------|
| Mailing Address |  |       |        | Phone Number |
| City            |  | State |        | Zip Code     |

Last Date of Employment: \_\_\_\_\_

List the business names and addresses below where you have applied for employment along with the last contact date for each.

| Business Name | Business Name Business Address |  |
|---------------|--------------------------------|--|
|               |                                |  |
|               |                                |  |
|               |                                |  |

I certify that: (1) The information provided above is true and correct; (2) I will provide additional documentation, as required, to Louisiana State University to support my request for deferment; (3) I will notify Louisiana State University immediately when the condition(s) that qualified me for deferment ends; and (4) I have read, understand, and meet the terms and conditions of the deferment for which I have applied.

| Signature of E | Borrower      | Date                             |                  |   |
|----------------|---------------|----------------------------------|------------------|---|
|                |               | FOR ACCOUNTING SERVICES USE ONLY |                  |   |
| □ Approved     | □ Disapproved | From: (MM/DD/YEAR)               | To: (MM/DD/YEAR) |   |
| Reviewed by _  |               |                                  | Date             | _ |

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