

**UNIVERSITY OF ST. THOMAS
REQUEST FOR ECONOMIC HARDSHIP DEFERMENT**

Name _____ SSN _____

Current Address _____

City/State Zip _____

Telephone numbers: (Day) _____ (Evening) _____

Employment Information: Provide information for current or most recent employer.

Employer Name; _____

Employer Address: _____

_____ city _____ state _____ zip

Employer Phone: (____) _____

Number of hours worked per week: _____ Hourly rate: _____ Date last worked: _____

CHECK ALL THAT APPLY

I am employed and experiencing financial difficulty

I have been granted economic hardship for a Federal Direct Student Loan or a Federal Family Education Loan. (Attach letter from lender)

Give the reason for your request below and complete the financial information form on the back.

I have read and completed both sides of this form and certify that all information given is true and correct.

Signature

Date

PLEASE RETURN TO:

**University of St. Thomas
2115 Summit Ave AQU 220
Saint Paul MN 55105-1096
Fax # (651) 962-6009 Attn: Perkins Loan
Phone (651) 962-6612**

For office use only:

FINANCIAL INFORMATION

Income--Monthly

Salary *Gross \$ _____ Net/mo. \$ _____
 (Name of Employer) _____

Cash on Hand \$ _____

Savings \$ _____

Other Income \$ _____

Assistance (Welfare, etc.) \$ _____

Net Salary--spouse \$ _____

(A) **TOTAL MONTHLY INCOME** \$ _____

Basic Living Expense—Monthly

Rent or Home Mortgage \$ _____
 (Name of Landlord or Mortgage Lender) _____

Utilities \$ _____

Food \$ _____

Insurance \$ _____

Clothing \$ _____

Transportation (other than car payments) \$ _____

Other (other than monthly debts below) \$ _____

(B) **TOTAL MONTHLY LIVING EXPENSES** \$ _____

Present Debts

(Include other student loans** you and your spouse, car loans, credit card accounts, personal and bank loans, etc. not listed above). If additional space is required, attach a separate sheet.

<u>CREDITOR</u>	<u>TYPE OF LOAN</u>	<u>BALANCE</u>	<u>MONTHLY PMT</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(c) **TOTAL MONTHLY DEBTS** =====

* evidence must be submitted to show the most recent total monthly gross income

** evidence must be submitted to show the most recent monthly payments being made on student loans and balanced owed

Please list two Personal References:

Name _____

Address _____

City, State, Zip Code _____

Telephone _____

Name _____

Address _____

City, State, Zip Code _____

Telephone _____