

**UNIVERSITY OF ST. THOMAS
REQUEST FOR UNEMPLOYMENT 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 seeking and unable to secure full-time employment
- I have registered with an employment agency
- I am receiving unemployment benefits
- I have never been employed

I am financially unable to repay my loan(s) according to my repayment schedule and hereby request federal forbearance from _____ to _____. 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 by 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			<u>_____</u>

Please list two Personal References:

Name _____

Address _____

City, State, Zip Code _____

Telephone _____

Name _____

Address _____

City, State, Zip Code _____

Telephone _____