

# BOSTON COLLEGE

## REQUEST FOR DEFERMENT OF PERKINS LOAN REHABILITATION TRAINING

A deferment for borrowers engaged in a full-time rehabilitation training program. The borrower must be taking part in a full-time program of vocational rehabilitation, drug or alcohol abuse treatment, mental health treatment, or a rehabilitation program through the Department of Veterans Affairs. A program official must certify the borrower's participation in the program. The rehabilitation program must be licensed, certified, or otherwise recognized as providing rehabilitation training by a responsible state agency.

### PART I - TO BE COMPLETED BY THE BORROWER

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Borrower's Name

Social Security Number

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Home Address

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City

State

Zip

Telephone Number

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Job Title

Email Address

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Job Description

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Name of Service Agency

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Address of Service Agency

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City

State

Zip

Telephone Number

- ▶  I am requesting deferment. (Loans will be deferred until 12 months of service has been completed. No payment is necessary during deferment.)

- ▶ Program period: Beginning \_\_\_\_\_ Ending \_\_\_\_\_  
Month Day Year Month Day Year

- ▶ If applying for deferment for the year just ending, also check below if you intend to complete another 12 months in the program:

- I intend to complete another year in the program to \_\_\_\_\_ .  
Date

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▶ Borrower's Signature

Date

**PART II - TO BE COMPLETED BY THE PROGRAM OFFICIAL**

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|--|-----|----|
| ▶ Is the borrower engaged in a full-time rehabilitation program?   | Yes | No |
| ▶ Is the borrower taking part in a full-time program of vocational rehabilitation, drug or alcohol abuse treatment, mental health treatment, or a rehabilitation program through the Department of Veterans Affairs? | Yes | No |
| ▶ Is the rehabilitation program licensed, certified, or otherwise recognized as providing rehabilitation training by a responsible state agency?   | Yes | No |

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Name and Title of Certifying Program Official

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Signature of Certifying Program Official

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Telephone Number

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Date

**Forms can be mailed or faxed to:**  
Boston College  
Office of Student Services, Lyons Hall  
140 Commonwealth Avenue  
Chestnut Hill, MA 02467  
Phone: 800-294-0294  
Fax: 617-552-4889