

# BOSTON COLLEGE

## REQUEST FOR UNEMPLOYMENT DEFERMENT OF PERKINS LOAN

### PART I - BORROWER INFORMATION

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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 seeking and unable to find full-time employment.  
I hereby apply for deferment of my student loan repayments, beginning \_\_\_\_\_ and ending \_\_\_\_\_.  
I waive any unexpired portion of my original grace period. I understand that such deferments are granted for intervals no longer than one year and if my employment situation continues, I must re-apply each year.
- ▶ This situation began \_\_\_\_\_.
- ▶ I will be able to resume regular payments on \_\_\_\_\_.
- ▶ Please provide the names, telephone numbers, and contact person of the employment agencies with whom you are registered. Include any relevant support documents (a letter of termination from your former employer, a copy of your unemployment benefits, documentation that you are actively seeking employment). Complete the *Income and Expense Summary* on the following page.

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Requests for unemployment deferments submitted without the required documentation will be denied.

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Borrower's Signature

Date

**PART II - INCOME AND EXPENSE SUMMARY**

**Reminder:** Requests for deferment or forbearance submitted without the required documentation will be denied.

▶ Marital Status:  Single  Married  Widow(er)  Separated/Divorced

▶ Number of Dependents: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ Age: \_\_\_\_\_

▶ Monthly income from ALL sources: (Attach a copy of your most recent pay receipt and your most recent income tax return.)

Gross Monthly Salary/Wages \_\_\_\_\_

Spouse's Monthly Salary/Wages \_\_\_\_\_

Child Support \_\_\_\_\_

Alimony/Support \_\_\_\_\_

Unemployment \_\_\_\_\_

Public Assistance \_\_\_\_\_

Social Security/Veteran \_\_\_\_\_

Stocks, Bonds, and Investments \_\_\_\_\_

Other: \_\_\_\_\_

Other: \_\_\_\_\_

**Total Monthly Income:** \_\_\_\_\_

▶ Bank Account Balances: Checking \_\_\_\_\_ Savings \_\_\_\_\_ Other \_\_\_\_\_

▶ Monthly Expenses: (Attach documents to support expense entries. If your other student loans are on forbearance or economic hardship, you must provide proof of their deferment status.)

Rent/Mortgage \_\_\_\_\_

Utilities \_\_\_\_\_

Child Care \_\_\_\_\_

Car Payments \_\_\_\_\_

Other Vehicles \_\_\_\_\_

Public Transportation \_\_\_\_\_

Insurance \_\_\_\_\_

Telephone \_\_\_\_\_

Cellular Phone/Pager \_\_\_\_\_

Food \_\_\_\_\_

Credit Cards \_\_\_\_\_

Other Charge Accounts \_\_\_\_\_

Medical \_\_\_\_\_

Cable/Satellite TV \_\_\_\_\_

Entertainment \_\_\_\_\_

Clothing/Dry Cleaning \_\_\_\_\_

Student Loans (Total Payment) \_\_\_\_\_

Other: \_\_\_\_\_

**Total Monthly Expenses:** \_\_\_\_\_

This information is being requested to determine your eligibility for deferment or forbearance. It will remain confidential, however, the Office of Student Services reserves the right to use this information if collection efforts become necessary. A credit bureau report may be ordered to verify the information provided.

▶ \_\_\_\_\_  
Borrower's Signature Date

**Mail or fax forms to:** Boston College Office of Student Services  
140 Commonwealth Avenue, Lyons Hall  
Chestnut Hill, MA 02467

Phone: 800-294-0294  
Fax: 617-552-4889