PLEASE READ THE FOLLOWING INFORMATION CAREFULLY
TO DETERMINE WHETHER YOU NEED TO TAKE ACTION.

This is to provide a deferment application for your private loan(s).

WHAT ACTIONS YOU NEED TO TAKE
If you wish to apply for deferment, please complete the enclosed application and include the required documentation and all signatures as detailed on the application.

ADDITIONAL INFORMATION YOU MAY FIND HELPFUL

- Returned deferment applications are typically processed within ten (10) days of receipt. You will receive a letter providing you with the results of your application review.

- It is important to continue to make payments until your deferment has been approved. If your loan(s) is or becomes delinquent, collection activities will continue until the account is brought current either by payment or a retroactively applied deferment.

- If you are currently using our electronic funds transfer service, Direct Debit, payments will continue to extract until your deferment request is approved. Please note that if at any time you wish to suspend a monthly extraction, you need to contact us at least three (3) business days prior to your due date.

- The Servicemembers Civil Relief Act (SCRA) allows members of the Uniformed Services to receive a reduced interest rate (not to exceed 6.000%) on qualifying debts during periods of active military service. Visit our website at www.aesSuccess.org or contact us at the telephone number provided above to learn more about the benefits that may be available for your student loans.
Private Loan Deferment Request

PLEASE COMPLETE ALL FIELDS BELOW. YOUR REQUEST MAY BE DENIED IF THE FORM IS NOT COMPLETED CORRECTLY.

ACCOUNT NUMBER ____________________________ / ______ / ________________________

BORROWER NAME ____________________________________________________________

ADDRESS ______________________________________________________________________

CITY __________________________ STATE ______ ZIP __________

TELEPHONE NUMBER (___) _________ - __________________________

ALTERNATE TELEPHONE NUMBER (___) _________ - __________________________

STUDENT BORROWER ___________________________________ ACCOUNT # ______________________

I consent to the lender and any other owner, holder, servicer, guarantor or insurer of my account to contact me about my account via autodialer or similar device and/or using a prerecorded or artificial voice or message for any lawful purpose utilizing any cellular telephone number(s) I provide, even if I am charged for the call under my phone plan. Providing my mobile or alternative telephone number(s) and electronic mail address(es) to the lender is voluntary and I am under no obligation to do so. If I do not elect to provide a mobile or alternative telephone number, or electronic mail address, it will not affect the consideration or disposition of my deferment request.

☐ SCHOOL DEFERMENT: _______ FULL TIME _______ HALFTIME

☐ INTERNSHIP/RESIDENCY DEFERMENT

☐ GRADUATE FELLOWSHIP

☐ U.S. MILITARY MOBILIZATION DEFERMENT - I will enclose a copy of my current Active Duty orders. I understand that my request may be denied if my orders are not enclosed.

☐ I would NOT like to invoke the Servicemembers Civil Relief Act (SCRA)

AUTHORIZED OFFICIAL'S CERTIFICATION REQUIRED FOR DEFERMENT
PLEASE PRINT OR TYPE

PROGRAM BEGIN DATE _______ PROGRAM END DATE _______ EXPECTED GRAD DATE ______

INSTITUTION/ORGANIZATION NAME _________________________________________________ DOE CODE ______

ADDRESS _________________________________________________________________

CITY __________________________ STATE ______ ZIP ______ TELEPHONE NUMBER ______

SIGNATURE OF AUTHORIZED OFFICIAL __________________________________ DATE ______

My signature indicates that I am an Authorized Official and I have read and agree that the certification above is true to the best of my knowledge.

I meet the qualifications as stated in the cover letter for the deferment type checked above and request my lender/servicer to defer repayment of my educational loan(s). If my loan program allows, accrued and unpaid interest may be capitalized, added to the principal balance, in accordance with the terms of my original promissory note. I understand that, should my situation under which I applied for the deferment change, I must notify my lender/servicer immediately.

BORROWER SIGNATURE __________________________________ DATE ______

RETURN COMPLETED FORM TO: American Education Services * P. O. Box 2461 * Harrisburg, PA 17105-2461

FAX: 717-720-3916