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

WHY WE ARE CONTACTING YOU
To provide you with an Internship/Residency forbearance form for your private loan(s)

WHAT ACTIONS YOU NEED TO TAKE
If you wish to apply, 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 applications are typically processed within 10 days of receipt. You will receive a letter indicating whether your request has been approved or denied.

• It is important to continue to make payments until your forbearance has been approved. If you are currently using Direct Debit, our electronic funds transfer service, please contact us at least 3 business days prior to your due date if you wish to suspend your monthly debit. If your loan(s) becomes delinquent, collection activities will continue until the account is brought current either by payment or a retroactively applied forbearance. Any forbearance retroactively applied will not result in the retraction of any negative reports on your credit file.

Short on time? View your payment history, pay online, check your balance, and more, at aesSuccess.org/accountaccess. Account Access is the quickest and easiest way to manage your student loan account – so you’ll have more time to focus on the other priorities in your life.
Private Loan Internship Residency
Forbearance 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 forbearance request.

AUTHORIZED OFFICIAL’S CERTIFICATION REQUIRED FOR FORBEARANCE
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 ___________ NAME/TITLE OF 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 forbearance type checked above and request my lender/servicer to forbear 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 forbearance 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