American Education Services  
P.O. Box 2461 Harrisburg, PA 17105-2461  
Toll-free 1-800-233-0557 • TTY – Dian711  
Fax 717-720-3931 or 717-720-2774  
www.aesSuccess.org • International 717-720-3100  

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

This is to provide a forbearance application for your KeyBank owned education loan(s) serviced by AES.  

WHAT ACTIONS YOU NEED TO TAKE  
If you wish to apply for forbearance, complete the application in its entirety and include the required documentation as detailed on the application.  

ADDITIONAL INFORMATION YOU MAY FIND HELPFUL  
- Returned forbearance applications are typically processed within 10-business 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 request has been approved. If your loan(s) is or becomes delinquent, collection activities will continue until the forbearance has been approved.  
- If you are currently using our electronic funds transfer service, Direct Debit, payments will continue to extract until your forbearance 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 business days prior to your due date.
ADMINISTRATIVE FORBEARANCE REQUEST

READ BEFORE COMPLETING FORM. ALL ITEMS RELEVANT TO YOUR REQUEST MUST BE COMPLETED.

ACCOUNT NUMBER __________________________
BORROWER NAME __________________________
ADDRESS ___________________________________
CITY ___ STATE ___ ZIP __________
PHONE NUMBER (______) _______ - ________

ALTERNATE PHONE NUMBER (______) _______ - ________

EMAIL ADDRESS ____________________________

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.

REQUEST TYPE - Must be completed by borrower.

I meet the qualifications stated on the reverse side for the forbearance checked below and request that AES Graduate and Professional Services approve forbearance for my eligible privately guaranteed loans. CHECK ONE:

☐ Align Repayment: Forbearance is available while I am in an interim period prior to repayment and have two or more eligible loans, including at least one loan with a nine month interim period and at least one loan with a six month interim period. (Granted for up to three months.)

☐ In School: Forbearance is available while I am enrolled, at least half time, in an approved accredited school and continuing in the discipline for which I obtained my loan. (Granted if certified by an authorized official, confirming discipline in the box below for up to the length of academic period not to exceed 12 months.) (The status of my enrollment is indicated below.)

* Original Field of Study (Discipline) ________________
* Current Field of Study (Discipline) ________________

PLEASE NOTE: Forbearance requests for In School Forbearance require certification by an authorized official before your request can be considered by AES Graduate and Professional Services.

AUTHORIZED OFFICIAL'S CERTIFICATION - Required for In School forbearance above. Please print or type.

Current Term Begin Date ______ / ______ / ______ Current Term End Date ______ / ______ / ______ Status: __________________________

Field of Study (Discipline) ____________________________________________________________ Dept. of Ed. School Code ________________

Name of Institution/Organization ___________________________________________________

Address ____________________________________________________________ Telephone Number ____________________

City __________________________ State ______ Zip __________

Signature of Authorized Official ____________________________________________ Date ____________________

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

I understand that any unpaid interest will be added to the outstanding balance at the end of the forbearance period. My monthly payments will be calculated at the end of the forbearance based on the new principal balance (including capitalized interest, if any) and will extend my repayment period. I understand that interest will continue to accrue on the unpaid principal balance (including capitalized interest, if any) during the forbearance period and the extension of the repayment period.

I understand that should my situation under which I applied for forbearance change, I must notify AES Graduate and Professional Services. In addition, I understand that this forbearance will be applied to all eligible loans.

The above information is true and correct to the best of my knowledge. I understand that misrepresentation may lead to the denial of my request. I have read and understand and agree to the contents of the application for forbearance.

BORROWER SIGNATURE __________________________ DATE __________

FOR OFFICE USE ONLY

Date Reviewed: ______ / ______ / ______ Examiner ____________________________ APPROVED ______ DENIED

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ELIGIBILITY CRITERIA FOR IN SCHOOL FORBEARANCE

(1) I am engaged and continuing in an accredited graduate or professional school or program.

(2) I must be enrolled at least half-time in a Department of Education approved program.

(3) I must provide AES Graduate and Professional Services with documentation or certification from an authorized official showing the beginning and ending dates of my program or have the authorized official complete this form.