

**National Defense/Direct Student/Perkins/Federal Perkins and University Loan Program  
Request for Deferment of Repayment**

TO COVER \_\_\_\_\_ TO \_\_\_\_\_

Part I - General Information

Name of Borrower	PSU ID	SSN
Address	Name of Lending Institution	
(Street)	<b>The Pennsylvania State University</b> <b>Office of Student Loans</b> <b>Room 108 Shields Building</b> <b>University Park, PA 16802</b> Contact us: <a href="http://www.studentloans.psu.edu">http://www.studentloans.psu.edu</a>	
(City) (State) (Zip)		
Phone No. Area Code ( )		
All NDSL Loans This is to certify that I am (was)		Fax No. (814) 865-6535
		Phone No. (814) 865-0461
From (Month and Year)		To (Month and Year)
<input type="checkbox"/> Serving an eligible internship/residency (2 yr. maximum)		
<input type="checkbox"/> Rehabilitation Training		
<input type="checkbox"/> Graduate Fellowship		
Tentative Termination Date for above status		
I claim exemption from payment of principal and accrual of interest on my Student Loan during the period indicated above. I agree to notify the lending institution upon termination of my claimed status.		
SIGNATURE OF BORROWER		DATE

Part II - Certification

**CERTIFICATION CANNOT EXTEND BEYOND ONE YEAR**

I certify that the information stated in Part I above is true and correct. The person named above is (was)	
<input type="checkbox"/> Serving an eligible Internship/Residency	<input type="checkbox"/> Rehabilitation Training
<input type="checkbox"/> Serving an eligible Graduate Fellowship	
Signature (official)	Date
Name of Institution or Organization	Official Seal or Stamp
Address (city, state, and zip code)	OPE #

Part III - Lending Institution Action

<input type="checkbox"/> Approved	Next Payment Due Date	_____
<input type="checkbox"/> Disapproved	Reason for Disapproval	_____
Signature of Approving Official	Date	_____