

# Economic Hardship Deferment Request



**Student Financial  
Services**

## SECTION 1: BORROWER INFORMATION

Check this box if any of your information has changed.

SSN \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone - Primary \_\_\_\_\_

Telephone - Alternate \_\_\_\_\_

Email \_\_\_\_\_

## SECTION 2: BORROWER DETERMINATION OF DEFERMENT ELIGIBILITY

<p># _____</p> <p>36 months per Emory Loan Program. †</p>	<p># _____</p> <p>o _____</p>	<p>Maximum cumulative eligibility is _____ @</p>
<p>U</p> <ul style="list-style-type: none"> <li>•</li> <li>• \ @ 8</li> <li>•</li> <li>•</li> <li>•</li> </ul> <p>†</p> <p>7</p> <p>•</p> <p>• o</p> <p>•</p>		
<p>support from you, including unborn children who will be born during the deferment period; and,</p> <ul style="list-style-type: none"> <li>• Other people, if, at the time you request this deferment, they live with you, receive more than half of their support from you, and will continue to receive this support from you during the deferment period. Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, and payment of college costs.</li> </ul> <p>@ _____ @ _____ the</p> <p>poverty guideline for your family size and state of residence (see Table 2 in Section 5)?</p> <p><input type="checkbox"/> # o</p> <p><input type="checkbox"/> V #</p>		

**SECTION 3: BORROWER REQUESTS, UNDERSTANDINGS, CERTIFICATIONS AND AUTHORIZATION****I request:**

- To defer repayment of my loans for the period during which I have an economic hardship, as described in Section 2.
- That my deferment begin on: \_\_\_\_\_
- If checked, to make interest payments on my loans during my deferment.

**I understand that:**

- I am not required to make payments of loan principal or interest during my deferment.
- My deferment will begin on the later of the date I became eligible or the date that I requested.
- My deferment will end on the earlier of the date that I exhaust my maximum eligibility, the certified deferment end date, or when I am no longer eligible for the deferment for another reason.
- If approved, I will receive a 6-month post-deferment grace period beginning on the date I no longer qualify for the deferment.
- Unless I am a Peace Corps volunteer, my deferment will be granted in increments of one (1) year. If I continue to be eligible for an Economic Hardship Deferment after one year, I may reapply, subject to the cumulative maximum.
- Unpaid interest will be due in full at the expiration of my deferment.
- Registration will not be permitted and transcripts and/or diplomas will not be released while in deferment.

**I certify that:**

- The information I have provided on this form is true and correct.
- I will provide additional documentation to my loan holder, as required, to support my deferment request.
- I will notify my loan holder immediately when my eligibility for deferment ends.
- I have read, understand, and meet the eligibility requirements in Section 2.

I **authorize** the entity to which I submit this request and its agents to contact me regarding my request or my loans at any cellular telephone number that I provide now or in the future using automated telephone dialing equipment or artificial or prerecorded voice or text messages.

**Borrower's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**SECTION 4: INSTRUCTIONS FOR COMPLETING THE DEFERMENT REQUEST**

Type or print using dark ink. Enter dates as month-day-year (mm-dd-yyyy.) Include your name and account number on any documentation that you are required to submit with this form. If you want to apply for a deferment on additional loans that are held by Emory, you must submit a separate deferment request for each loan. Return the completed request form and any required documentation to:

**Email:** student.financials@emory.edu

**Mail:** Emory University  
Attn: Student Financial  
Services 101 B. Jones Center  
200 Dowman Drive Atlanta,  
GA 30322

For questions regarding this request, please contact Student Financial Services at the email above or call (404)727-6095.

**For Student Financial Services Office Use Only:**

Deferment Approved from \_\_\_\_\_ to \_\_\_\_\_

Deferment Denied

Reason \_\_\_\_\_

Date of Denial \_\_\_\_\_

Deferment Documentation Received Date \_\_\_\_\_

Deferment Reviewed By \_\_\_\_\_

Authorized Signature \_\_\_\_\_

**SECTION 5: TABLES**

**Table 1. Capitalization Chart**

*Note: On Emory Loans, interest is NOT CAPITALIZED and is due upon expiration of your deferment.*

Treatment of Interest with Deferment/Forbearance	Loan Amount	Capitalized Interest	Outstanding Principal	Monthly Payment	Number of Payments	Total Repaid
Interest is paid	\$30,000	\$0	\$30,000	\$333	120	\$41,767
Interest is capitalized at the end	\$30,000	\$1,800	\$31,800	\$353	120	\$42,365
Interest is capitalized quarterly and at the end	\$30,000	\$1,841	\$31,841	\$354	120	\$42,420

**Table 2. 150% of the Poverty Guidelines for 2019 (Monthly)**

Family Size	Alaska	Hawaii	All Others
1	\$1,950.00	\$1,797.50	\$1,561.25
2	\$2,641.25	\$2,432.50	\$2,113.75
3	\$3,332.50	\$3,067.50	\$2,666.25
4	\$4,023.75	\$3,702.50	\$3,218.75
5	\$4,715.00	\$4,337.50	\$3,771.25
6	\$5,406.25	\$4,972.50	\$4,323.75
7	\$6,097.50	\$5,607.50	\$4,876.25
8	\$6,788.75	\$6,242.50	\$5,428.75
Each additional person, add	\$691.25	\$635.00	\$552.50

**If you do not live in the United States, use the poverty guideline amount in the column labeled "All Others."**