

FINANCIAL ARRANGEMENT FORM

NAME OF BORROWER:		ACCOUNT NUMBER(S):
PERMANENT ADDRESS: <input type="checkbox"/> Check if new address _____ _____		NAME OF LENDING INSTITUTION: (IU Campus from which loan originated) _____ _____
LAST FOUR OF SOCIAL SECURITY:	EMAIL ADDRESS:	IU STUDENT ID NUMBER:
CELL PHONE NUMBER:	WORK PHONE NUMBER:	HOME PHONE NUMBER:

Acknowledgements and Certification

I understand that all information and supporting documents submitted will be held in strictest confidence and will not be subject to dissemination outside the requirements of the Lending Institution.

I am aware that my request for deferment or forbearance neither implies the Lending Institution will grant my request nor signifies the dates of my request will be those necessary for my account.

I further understand that this arrangement will consist of reduced or deferred payments, as determined by the Lending Institution based on my financial situation.

I recognize it may be necessary to make payments for timeframes prior to the start date of eligibility of my deferment or forbearance request.

I recognize it may be necessary to make accelerated payments at the expiration of this arrangement to repay my loan(s) within the maximum repayment period.

If I have an HPSL, PCL, NSL, or LDS and am approved for forbearance, I acknowledge my interest is required to be paid each month. I recognize failure to pay the interest may result in my loan becoming delinquent and reported negatively to the credit bureaus.

I certify that all statements made are true and correct. I also certify that I will immediately notify the Lending Institution of any change in my employment status or significant change in my financial situation. I authorize a representative of the Lending Institution to obtain pertinent information from applicable parties for verification purposes.

Borrower Signature
(Failure to sign will result in form being denied.)

Date

If you need assistance or have questions on how to complete this form, please contact University Collections & Loans Services at Indiana University (800) 458-8756 or ucls@iu.edu

Please submit completed form to:

ECSI
PO Box 1289
Moon Township, PA 15108

OR



Indiana University
1024 E 3rd Street Room 122
Bloomington, IN 47405



FINANCIAL STATEMENT

For enrollment requests, the Financial Statement is not needed.

1. Marital Status: (check one)

_____ Single _____ Widow(er)
_____ Married _____ Divorced or Separated

2. Dependents:

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Employment Information: Provide information for current or most recent employer.

Employer Name: _____ Employer Phone: (_____) _____

Employer Address: _____

City _____ State _____ Zip _____

Full-time: _____ Part-time: _____ Date of hire: _____ Date last worked: _____

Number of hours worked per week: _____ Hourly Rate: _____ Salary: _____

4. Monthly Income: (Please provide written documentation supporting reported income)

Gross Monthly Income	\$ _____
Net Monthly Income	\$ _____
Public Assistance and type:	\$ _____
Support Income (if separated or divorced)	\$ _____
Other Income and type:	\$ _____

5. Monthly Expenses:

List all outstanding student loans by name/type and Lending Institution. Provide supporting documentation for all educational loans not owed to the Lending Institution to which you are submitting this application. Include the original total loan amounts, outstanding loan balances and monthly payment amounts. If a loan is currently deferred, provide the monthly payment amount as if it were not in deferment.

Loan Name/Type	Lending Institution	Original Loan Amt.	Balance Outstanding	Monthly Payments
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____	\$ _____
Mortgage/Rent			\$ _____	\$ _____
Car Expenses			\$ _____	\$ _____
Student Loans			\$ _____	\$ _____
Gas, Insurance			\$ _____	\$ _____
Credit Cards			\$ _____	\$ _____
_____	_____		\$ _____	\$ _____
_____	_____		\$ _____	\$ _____
Personal Loans (list type):			\$ _____	\$ _____
_____	_____		\$ _____	\$ _____
_____	_____		\$ _____	\$ _____
Medical			\$ _____	\$ _____
Utilities			\$ _____	\$ _____
Telephone			\$ _____	\$ _____
Insurance (Life, Health, Home)			\$ _____	\$ _____
Food			\$ _____	\$ _____
Monthly Support Payments (if separated or divorced)			\$ _____	\$ _____
Other Expenses:			\$ _____	\$ _____



DEFERMENT REQUEST

Please select all applicable statements and return the requested supporting documentation to expedite the verification of your eligibility and approval of your deferment request.

- ☐ I am employed full time/part time (circle one) and experiencing financial difficulty.
- ☐ **IU Institutional Loans only:** I would like to request forbearance consideration for the begin date _____ and end date _____. I would like to pay interest monthly/at the end (circle one) of my forbearance.
- ☐ **IU Institutional Loans only:** I am currently/was enrolled at least half-time in a collegiate program at _____. My enrollment began on _____ and ended on _____.
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I am employed full time and gross less than 150% the federal poverty guidelines for my family size. ***Include supporting pay stubs.***
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I am underemployed (working less than 30 hours) and am seeking full-time employment. My underemployment began on _____.
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I am/was unemployed and sought full-time employment. My unemployment began on _____ and ended on _____.
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I am/was receiving unemployment benefits. My benefit began on _____ and ended on _____. ***Include official documentation of this benefit.***
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I am not eligible to receive unemployment benefits.
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I have never been employed and am not seeking full-time employment.
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I have been granted an Unemployment Deferment for a Federal Direct Student Loan or a Federal Family Education Loan. My benefit began on _____ and ended on _____. ***Include official documentation of this benefit.***
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I have been granted an Economic Hardship Deferment for a Federal Direct Student Loan or a Federal Family Education Loan. My benefit began on _____ and ended on _____. ***Include official documentation of this benefit.***
- ☐ **IU Miller, Miller HomeStretch, Crimson Loans only:** I am receiving payment under federal or state public assistance. (Section 8, SNAP, SSI, State-sponsored General Assistance, etc.) ***Include official supporting documentation.***
- ☐ **HPSL, PCL, NSL, LDS, NFLP only:** I would like to request forbearance consideration for the begin date _____ and end date _____. I understand I must pay interest monthly during my forbearance, and my remaining monthly installments may increase to ensure my loan is paid by date of maturity.
- ☐ **HPSL, PCL, NSL, LDS, NFLP only:** I am currently/was enrolled at least half-time in a collegiate program in the same discipline for which my loan(s) were disbursed. My enrollment began on _____ and ended on _____. ***Include a signed letter on your university letterhead detailing the dates of enrollment, student status, course of study, and anticipated graduation date.***

Please also describe the any other details of your circumstance to consider when reviewing your account for deferment. If you are unemployed or underemployed and not a recipient of unemployment payments, please list 3-4 of the most recent places where you have applied on the lines below.

