



## **REQUEST FOR STUDENT DEFERMENT OF VANDERBILT STUDENT LOANS**

### **PART I: To Be Completed By Borrower**

Name of borrower: \_\_\_\_\_

Account Number: \_\_\_\_\_ Signature: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Residence address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone number: (\_\_\_\_) \_\_\_\_\_ Email address: \_\_\_\_\_

This is to certify that I am enrolled as a student at an institution of higher learning.

From (Mo/Day/Yr): \_\_\_\_\_ To (Mo/Day/Yr): \_\_\_\_\_

Deferments can be granted for one semester/quarter at a time. To receive a deferment, you must submit at the beginning of each term a form certified by the registrar of the university you are attending.

---

### **PART II : To Be Completed By College or University**

I certify that the information stated in Part I is true and correct. The person named is or was:

enrolled as a student \_\_\_\_ full-time. \_\_\_\_ half-time. \_\_\_\_ less than half-time.

Course of study (required for Federal Nursing Loans only): \_\_\_\_\_

Signature of authorized official: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

College or university: \_\_\_\_\_ OPEID #: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: (\_\_\_\_) \_\_\_\_\_ Date: \_\_\_\_\_

**Please return to:**  
**Vanderbilt University**  
**Office of Student Loans**  
**PMB 406217**  
**Nashville, TN 37240**  
**Phone: (615) 322-6693**  
**Phone: (800) 288-1144**  
**Fax: (615) 343-8511**

\_\_\_\_\_  
**(OFFICIAL SEAL OR STAMP)**