Education Financial Services

PO Box 5185 Sioux Falls, SD 57117-5185 1-800-658-3567 FAX: 1-800-456-0561



Request for forbearance

Private loans - In-School

Note: Not all Wells Fargo private student loans are eligible for forbearance. Please contact us at 1-800-658-3567 to verify eligibility.

Forbearance allows you to temporarily stop making payments on your account; however, interest continues to accrue on your loan(s). You remain responsible for repaying this accrued interest, which you can do either by paying interest as it accrues or by having it added to the principal balance of your loan. Amounts paid during the forbearance period will be credited toward your accrued unpaid interest. Any remaining amounts will be applied to unpaid principal. When your forbearance ends, any unpaid interest is added to the principal balance of your loan(s).

Please carefully read this entire form before you begin completing it. You must include all the information in Sections 1 and 3, and have Section 2 completed by an authorized school official before you return this form to our office. Remember, you must continue making monthly payments until you have been notified that the forbearance is approved.

Please initial any changes you make

	1: Borrov	•	•								
NAME							SSN OR ACCOUNT NUMBER				
<u></u>											
STREET AD	DDRESS						(AREA CODE) TELEPHONE NUMBER				
CITY				STATE	ZIP CODE		() DRESS (OPTION	A1.)		
CITT				STATE	ZIF CODE		LMAIL AD	DRESS (OF HON	AL)		
Section	2: School	informa	tion	•	(Completed by an authorized school official)						
NAME OF S	SCHOOL										
STREET ADDRESS					SCHO			OOL CODE			
CITY				STATE	ZIP CODE		(AREA CO	DE) TELEPHONE	NUMBER		
							()			
Attenda	ance dates	and statu	s Most rece	nt enrollment	term is requir	ed; additional e	enrollme	nt history is	optional.		
Status	(Please che	ck)			Dates (MN	1/DD/YY)					
FT 🗌	3/4	нт 🗌	LTHT	LOA 🗌	From:			To:			
FT 🗌	3/4	нт 🗌	LTHT	LOA 🗌	From:			To:			
FT 🗌	3/4	нт 🗌	LTHT	LOA 🗌	From:			To:			
FT 🗌	3/4	нт 🗆	LTHT	LOA 🗌	From:			To:			
FT 🗌	3/4	нт 🗌	LTHT	LOA 🗌	From:			To:			
FT 🗌	3/4	HT 🗌	LTHT	LOA 🗌	From:			To:			
Withdrav	wal date:					FT = Full	time 3	3/4: Enrolled	l ¾ time	HT = Half time	
Expected	d/Graduatior	n date:				LTHT = Le	THT = Less than half time LOA = Leave of absence				
Signature of authorized school official					Date						
Section	3: Agreer	nent									
accrued my loar agree u Promiss you will	d during the n(s). I unde upon termir sory Note a I notify me	e forbeara erstand th nation of t and/or Loa of my pa	ance period le maximu his forbea an Request yment am	d that is not im length of rance agree t/Consumer	paid will be a single forb ment to repa Credit Agree e next due da	eginning date added to and be earance agree y this loan(s) ment and my ate when this f	become ement r accordi repaym	e part of the may not ex- ing to the t nent schedu	e princip ceed 12 erms of ule. I und	al balance of months. I my derstand that	
Borrowe	r signature					Date					