

**RAEBURN E. BARNES TRUST  
DEFERMENT REQUEST  
CONTINUING EDUCATION**

This form is used to request suspension of payments on your Barnes Trust Loan for the following reason(s): being a full time student in an undergraduate program working toward another undergraduate degree or being a full time student in a graduate program. The aggregate deferral period may not exceed more than 24 months for an additional undergraduate degree. The aggregate deferral period may not exceed more than 36 months for a graduate degree. Please note, the maximum period from disbursement of your first loan to complete repayment of all loans shall not exceed fifteen years, unless approved by the Trustees. **If repayment is deferred for the above reasons interest will not accrue during the period of deferral, i.e. 24 months for additional undergraduate degree or 36 months for graduate degree.**

PERSONAL INFORMATION

Name: \_\_\_\_\_ S.S.#: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Excluding yourself, are you required to support others? If so, how many persons \_\_\_\_\_

When are you requesting payment deferment to begin? \_\_\_\_\_

State reason for deferral request \_\_\_\_\_

What college or university are you planning to attend? \_\_\_\_\_

What degree are you pursuing? \_\_\_\_\_

How long will it take to earn your degree? \_\_\_\_\_

What is your projected graduation date? \_\_\_\_\_

**Please send a copy of your acceptance letter.** I certify that all statements made above are true and correct and that I will immediately notify the administrator of any change in my status.

SIGNATURE \_\_\_\_\_

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

Return form to: Administrator  
Raeburn E. Barnes Trust Student Loan Program

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