UTAH HIGHER EDUCATION ASSISTANCE AUTHORITY

INTERNSHIP/RESIDENCY FORBEARANCE REQUEST FORM

BORROWER INFORMATION

Name	Account #	
Street Address	Daytime Phone # ( )	Evening Phone # ( )
City State ZIP	E-mail Address	

REFERENCE INFORMATION

Name (Relative; not living with you)	Relationship	
Street Address, City, State & ZIP		Daytime Phone # ( )
Name (Relative; not living with you)	Relationship	
Street Address, City, State & ZIP		Daytime Phone # ( )

EMPLOYMENT INFORMATION

Employer's Name	Phone # ( )	
City	State	ZIP

The Internship/Residency Forbearance is available if your two-year Internship Deferment eligibility has expired or if you are not eligible for an Internship Deferment because of the terms of your promissory note. This forbearance is granted in yearly increments and you must reapply annually. To qualify for the forbearance you must complete and return this request form along with a statement from an authorized program official certifying:

- That the internship or residency program is a supervised training program that requires the completion of at least a bachelor's degree before acceptance into the program.
- That you have been accepted into the program.
- The anticipated dates on which you will begin and complete the program, or begin and complete the minimum period of participation in the program that the state requires before an individual may be certified for professional practice or service, whichever is less.
- That completion of the program leads to a degree or certificate awarded by a hospital, health care facility, or institution of higher education that offers postgraduate training (for a medical internship or residency training program performed at a hospital, health care facility, or institution of higher education only).
- That completion of the program is required before you can begin professional practice or service (for a non-medical internship program that is required of you to begin professional practice of service only). You must also provide this certification from the appropriate state licensing agency.

Remember, forbearance is a temporary postponement of your monthly payment. While the forbearance period is in effect, interest will continue to accrue and you will be responsible for the accrued interest. You may pay the interest while it accrues by accessing your account at www.uheaa.org. If you choose not to pay the interest, it will be added to your principal balance (capitalized) in accordance with the terms of your Master Promissory Note. If you allow the interest to capitalize, you will pay interest on interest.

If you are currently past due on your payments, please return this form to us immediately! Collection activities will continue until this form is received and approved.

FORBEARANCE REQUEST & AGREEMENT

I certify that I intend to repay my educational loan(s); however, I am temporarily unable to make payments at this time due to an internship/residency. If I have delinquent loans at the time of this request, I further agree to allow UHEAA, or its servicing agent, to grant me forbearance for all my payments due (and not paid) before the begin date of my Internship/Residency Forbearance. I understand that the maximum length of a single forbearance agreement cannot exceed 12 months. Any outstanding interest will be capitalized as stated above; therefore, my repayment terms may be affected. I agree to the terms of this forbearance and agree to repay my loan(s) upon the expiration of this forbearance and in accordance with the terms of my promissory note(s).

Signature: _____ Date_____

INRSFM

MAIL OR FAX THIS FORM TO:
UHEAA, Attn: Origination and Repayment Services, PO Box 145110, Salt Lake City, UT 84114-5110
Phone (877) 336-7378 Fax (801) 366-8431