



## Private Loan In-School Assistance Request for Student and Parent Borrowers

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### Section 1: Borrower Information (Student or Parent)

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

Name: \_\_\_\_\_

Email Address (optional): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone – Primary: \_\_\_\_\_ Phone – Alternate: \_\_\_\_\_

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### Section 2: Student Identification

(This Section for College Family and Parent Partnership Loans Only.)

I understand the assistance being requested requires that the student, who is listed below, attend a Title IV eligible school on at least a half-time basis, as defined by the school. If I have College Family or Parent Partnership loan(s) for additional students who also qualify for this assistance, I must submit a separate form for each student. **Note:** Immediate Payment and Interest-Only Payment College Family and Parent Partnership loans are not eligible for in-school assistance. Contact us to discuss your other options.

Student's Name: \_\_\_\_\_

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### Section 3: Additional Information

#### Auto-Debit Borrowers

If you are currently using auto-debit and will not have the funds available for your next scheduled debit, call Aspire Servicing Center<sup>SM</sup> at least five business days prior to your due date to have the next scheduled debit suspended. This should allow you time to submit your assistance request. However, keep in mind that you are responsible for all of your monthly installments until your request for assistance is approved.

#### Explanation of Interest Capitalization

Capitalization of interest is the addition of outstanding accrued interest to the current principal balance of the loan(s). Capitalization of interest results in a higher principal balance and additional finance charges over the course of repayment and may cause your monthly payment amount to increase. Aspire Servicing Center may automatically capitalize outstanding interest at the expiration of an assistance period if allowed by the credit agreement you signed. If capitalization is applicable for the assistance period, you will receive monthly notices advising you of the amount of interest that has accrued on your loan(s). These notices give you the opportunity to satisfy outstanding interest before capitalization.

Return **both pages** of this completed form and any required documentation to:

Aspire Servicing Center  
P.O. Box 659705  
West Des Moines, IA 50265-0970  
Phone: (800) 243-7552  
Fax: (515) 471-3983

Electronic submission: [www.AspireServicingCenter.com/submit](http://www.AspireServicingCenter.com/submit)

For more information, visit our website at: [www.AspireServicingCenter.com](http://www.AspireServicingCenter.com)

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### Section 4: Authorized School Official's Certification

**Note:** As an alternative to completing this section, the school may attach its own enrollment certification report listing the required information.

I certify, to the best of my knowledge and belief, the student named below is/was enrolled as (check the appropriate box)  a full-time student  at least a half-time student during the academic period from \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ to \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ and is reasonably expected to complete his or her program requirements on \_\_\_\_\_.

Student's Name: \_\_\_\_\_

Name of Institution: \_\_\_\_\_ OPE-ID \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Title of Authorized Official: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Authorized Official: \_\_\_\_\_

Authorized Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### Section 5: Borrower Understanding and Certification

If I or the student on whose behalf I borrowed attends a non-Title IV eligible school or attends a Title IV eligible school on a less than half-time basis, I may not be eligible for in-school assistance. Other assistance may be available.

I understand that:

- I am not required to make payments during authorized periods of assistance; however, I am responsible for the interest that accrues on my private loan(s) during this period.
- I may choose to make interest payments during periods of assistance.
- When the assistance ends, any unpaid interest may be capitalized (added to the principal balance) if allowed by the credit agreement that I originally signed.
- I am responsible for any monthly installments due before the start date of the assistance.

An authorized period of assistance is any amount of time that I have requested and Aspire Servicing Center, at its sole discretion, has granted, during which I will not have to make monthly payments. Maximum assistance time allowed varies by loan program. Specific assistance information for the loan type(s) I have are contained in my credit agreement(s). If I cease to be an eligible student, but subsequently become an eligible student again, Aspire Servicing Center may automatically grant to me an authorized period of assistance. I may cancel this authorized period of assistance at any time by providing written notification to Aspire Servicing Center.

I authorize the school, the lender, the guarantor and their respective agents and contractors to contact me regarding my loan(s), including repayment of my loan(s), at the current or any future number that I provide for my cellular phone or other wireless device using automated phone dialing equipment or artificial or prerecorded voice or text messages.

Borrower's Signature: \_\_\_\_\_ Date: \_\_\_\_\_