

GENERAL CANCELLATION BENEFIT
INFORMATION FOR FULL-TIME TEACHERS AND LIBRARIANS

A borrower is entitled to have up to 100 % of a loan under the Federal Perkins Loan program canceled for qualifying service in a public or nonprofit elementary or secondary school, as a full-time teacher in a federally designated low-income school or educational services agency; a full-time special education teacher, including teachers of infants, toddlers, children or youth with disabilities; or a full-time teacher in a field that is determined by a state education agency as having a shortage of qualified teachers, including the fields of mathematics, science, foreign languages, bilingual education or in any other field of expertise.

As of 8/14/2008, a full-time faculty member at a Tribal college or university; or a librarian with a master's degree in library science employed in a low-income school or public library serving low-income schools.

No portion of any loan may be canceled for services the borrower performed before the date the loan was disbursed, or during the same period the loan was received. The cancellation rate per year of service is:

- 15% of the original principal loan amount for each of the first and second years
- 20% of the original principal loan amount for each of the third and fourth years
- 30% of the original principal loan amount for the fifth year

DEFINITIONS

Children and youth with disabilities are children from ages 3 through 21 who require special education and related services because they have disabilities as defined in section 602(a)(1) of the Individuals with Disabilities Education Act. Infants and toddlers with disabilities are children from birth to age two who need early intervention services for specified reasons as defined in section 672(1) of the Individuals with Disabilities Education Act.

DEFERMENT: If you are working in a position which you believe will qualify you for partial cancellation, a form requesting deferment must be filed at the start of service to suspend billing and defer payments of principal and interest. A six-month post-deferment grace period follows.

CANCELLATION: Cancellation applications must be submitted at the completion of each twelve months of service.

Improper completion of forms will cause delays in updating your loan. Until the SUNY Student Loan Service Center receives all the proper documentation, you will continue to receive notices that payment is due. Your loan will be subject to late fees and credit bureau reporting. Not filing a form in a timely manner is equivalent to sending payment past the due date.

Return completed forms to:

**SUNY Student Loan Service Center
5 University Place
Rensselaer, New York 12144-3440**

If you have questions, please call and speak with a representative of the SUNY Student Loan Service Center before you complete your application. You may call (518) 525-2626 or send an email to: slsc@albany.edu.

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and New York State Penal Law.

**STATE UNIVERSITY OF NEW YORK
STUDENT LOAN SERVICE CENTER**

5 UNIVERSITY PLACE
RENSSELAER, NEW YORK 12144-3440
TEL: (518) 525-2626 EMAIL: slsc@albany.edu

**FEDERAL PERKINS LOAN PROGRAM
DEFERMENT /CANCELLATION REQUEST FOR QUALIFYING TEACHING SERVICE**

NAME: _____ 898-____ - _____ OR _____
(Please print full name) (Enter your SUNY SLSC SID #) (Last 4 digits of SSN)

MAILING ADDRESS: _____

PLEASE READ THE GENERAL INFORMATION BEFORE COMPLETING THIS FORM

PART I: To be completed by applicant. An employer-certified job duties on school letterhead must be attached.

Select One Profession Only:

- I declare I am /was employed FULL-TIME as: _____ a teacher in a federally designated low-income school or low-income educational services agency. (educational services agency effective 08/14/2008)
- _____ a librarian with a master's degree in library science employed in a low-income school or public library serving low-income schools. (effective 08/14/2008) **Official job duties and a copy of your Master's Degree are required to process your request.**
- _____ a special education teacher of disabled children. **Official job duties required**
- _____ a teacher in a shortage field. **Official job duties required**
- _____ a faculty member at a Tribal college or university. (effective 08/14/2008)
Official job duties required

I am requesting:

_____ **DEFERMENT** from ____/____/____ to ____/____/____ as **I anticipate completing one full year of service.**
(EMPLOYMENT DATES MUST EQUAL ONE YEAR)

_____ **CANCELLATION** from ____/____/____ to ____/____/____ as **I have completed one full year of service.**
(EMPLOYMENT DATES MUST EQUAL ONE YEAR)

DECLARATION: I declare all information provided in this request to be accurate and true. I will notify the SUNY SLSC immediately of any change in my employment status and begin payment if required.

Signature of Borrower Date Email Address

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form or on any accompanying documents shall be subject to penalties which may include fines, imprisonment or both, under the U.S. Criminal Code and New York State Penal Law.

PART II: To be completed by an official of the employing school or agency.
An employer-certified job duties on school letterhead must be attached; except for teachers in a designated low-income school.

Certification: I certify that the above information is true and correct.

Place school seal or stamp here

If no seal or stamp please provide explanation on letterhead

Name of School

School District

Address

County

City, State, Zip

Telephone No.

Print Name and Provide Signature of Authorized Official (Signature stamp is unacceptable) Date

PART III: SUNY SLSC Determination:

Approved and processed for:

Initials/Date:

Denied/Reason:

Return original document by mail to: SUNY Student Loan Service Center

SUNY SLSC WEB 1/2016