

## COVID-19 National Disaster Forbearance Request

Account Number or Social Security Number: \_\_\_\_\_

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

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

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

I request that assistance be applied to my account beginning the date this form is received and ending 3 months in the future, unless I specify an end date less than 3 months into the future.

End assistance on the following date that is less than 3 months into the future (optional): \_\_\_\_\_  
MM/DD/YYYY

I hereby certify that I am experiencing financial hardship as a result of COVID-19, and I authorize Higher Education Servicing Corporation to place assistance on my federal and/or private student loans for up to 3 months. Higher Education Servicing Corporation may use forbearance to cover any period of delinquency that exists when I submit this form, and I understand unpaid interest after this period may capitalize and be added to my loan balance.

By submitting this completed form, I indicate my understanding that:

- **Not all loans may be eligible for COVID-19 National Disaster Forbearance.**
- **Interest will continue to accrue during the COVID-19 assistance period.**
- I may make payments toward interest at any time during the assistance period. **My future payments will first be applied to paying off any outstanding accrued interest before reducing my principal balance.**
- This assistance does not remove any past negative credit reporting that may have occurred prior to the assistance being applied.
- If COVID-19 is not the cause of my financial hardship, Higher Education Servicing Corporation has other assistance available that may apply to my circumstances.
- If this type of assistance is still available and I continue to experience the effects of COVID-19 when this requested period of assistance ends, I may request additional national disaster assistance.
- Higher Education Servicing Corporation may, in its sole discretion, discontinue accepting new requests under this program at any time without notice.

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

\* **Please note:** Typed signatures are not accepted.

**Submit this completed and signed form electronically through your online account at [www.hescloans.com](http://www.hescloans.com).**

**Or return to:**

Higher Education Servicing Corporation  
4381 W. Green Oaks Blvd., Suite 200  
Arlington, TX 76016  
Fax: (817) 792-7878