

SPECIAL HANDLING AGREEMENT

UNIVERSITY OF VERMONT
Student Financial Services
221 Waterman Building
85 South Prospect Street
Burlington, Vermont 05405

Phone: 802-656-4345
Fax: 802-656-8604
Email: csc@uvm.edu

Borrower's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

A SPECIAL HANDLING AGREEMENT, allows you to make special payment arrangements that you can afford based on your present circumstances. In *most* circumstances, this agreement is used when a forbearance, deferment or loan rehabilitation is not option for loan repayment.

Please be advised: this agreement does not remove your loans from delinquency. *Also, if consistent monthly payments are not made, your loan may be accelerated and turned over to a collection agency for vigorous collection efforts.*

I am requesting special payment arrangements for my University of Vermont Student Loans as listed:

I promise to pay _____ every month, beginning (**date**) _____ and understand that my payment is due by the first of the month. **This agreement is good for up to 12 months from the date above.**

Borrower's Signature: _____

Student ID Number: _____ Date: _____

Please mail your first payment to UVM with this signed agreement to the address listed above.

Following this initial payment, you will receive a monthly bill from ECSI requesting that you pay according to "special arrangements". If at any time, you do not receive a bill by the 20th of each month, please call our office immediately.

A letter of confirmation or denial of your request will be mailed to you after careful review of your completed application. Please contact our office if you have any questions. Thank you.