

# Request for Cancellation Form

We recommend that you read your promissory note carefully in order to become familiar with a number of features, duties, and, more specifically, what is and is not available relating to a deferment or cancellation before completing this form.

BORROWER'S NAME/ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MAIL FORM TO:

Oral Roberts University  
Student Loan Servicing Center  
P.O. Box 700895  
Tulsa, OK 74170-0895

EMAIL ADDRESS:  
LENDING INSTITUTION:

Account Number:  
(Last 4 digits of SSN or SID)

## Section 1 Perkins Cancellation Type

Refer to the specific section on the backside of this form

This is to certify that I am employed FULL TIME as a:

- \_\_\_ Teacher in a designated school listed in the 'Federal Register' (Section A)
- \_\_\_ Special Education Teacher or qualified provider of Early Intervention Services / Teacher of Handicapped (Sections A.B)
- \_\_\_ Teacher of Mathematics, Science, Foreign Languages, Bilingual Education (loans after 7-23-92) (Section A)
- \_\_\_ Staff member performing qualified service under the Headstart Act (Section C)
- \_\_\_ Nurse – **must provide copies of License/Certification** (Section D)
- \_\_\_ Medical Technician – **must provide copies of License/Certification** (Section D)
- \_\_\_ Law Enforcement/Corrections Officer for an eligible Local, State, or Federal Agency (after 11-29-90) (Section E)
- \_\_\_ Service agent providing or supervising the provision of services to High Risk Children for Low-Income Communities and Families of such children (after 7-23-92) (Section F)
- \_\_\_ Military Service Cancellation (Section G)
- \_\_\_ Peace Corps volunteer or Americorps\*VISTA volunteer (Section H)

## Section 2 Certification Period

Please complete all of the following that applies:

Deferment in anticipation of cancellation (for THIS or NEXT year) – Starting date \_\_\_\_\_ Ending date \_\_\_\_\_  
Cancellation for year of work completed (for PREVIOUS year) - Starting date \_\_\_\_\_ Ending date \_\_\_\_\_

If for any reason I am unable to complete the YEAR of service, I will inform ECSI of the change in full time status immediately.

## Section 3 Borrower Signature

I declare that the information above is true and correct.

Signature of borrower \_\_\_\_\_ Date \_\_\_\_\_ Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

## Section 4 Certification by Employer

I certify that the information stated above is true and correct.

Employed by school, hospital, dept., or agency \_\_\_\_\_ County \_\_\_\_\_  
Start date of employment: (mmddyy) \_\_\_\_\_ Is employee still employed? Yes \_\_\_ No \_\_\_ End date of employment \_\_\_\_\_  
School name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Description of Exact Duties \_\_\_\_\_ Please attach an official Job Description  
Signature of Authorized Official \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name of Authorized Official \_\_\_\_\_ Title \_\_\_\_\_

**THIS FORM IS INVALID WITHOUT OFFICIAL INSTITUTIONAL SEAL, STAMP PLACED HERE:  
(NOTARY SEAL NOT ACCEPTABLE)**

**IF EMPLOYER SEAL OR STAMP NOT AVAILABLE PLEASE ATTACH LETTERHEAD CERTIFICATION**

**THIS FORM WILL BE RETURNED TO BORROWER IF INCOMPLETE**

- A. Teacher Cancellation:** A teacher in a school serving students from low-income families; A special-education teacher, including teachers of infants, toddlers, children, or youth with disabilities; or a teacher in the fields of mathematics, science, foreign languages, or bilingual education, or in any other field of expertise that is determined by a state education agency to have a shortage of qualified teachers in that state.
- B. Early Intervention Cancellation:** Schools must cancel up to 100% of a Perkins Loan if the borrower has been employed full time as a qualified professional provider of early intervention services in a public or other nonprofit program under public supervision.
- C. Head Start Cancellation**  
Schools must cancel up to 100% of a Perkins Loan if the borrower has served full time as a staff member in the educational part of a preschool program carried out under the Head Start Act.  
A full-time staff member is someone who is regularly employed in a full-time professional capacity to carry out the educational part of a Head Start Program.
- D. Nurse or Medical Technician Cancellation**  
Schools must cancel up to 100% of a Perkins Loan if the borrower has served full time as a nurse or medical technician providing health care services. The borrower must provide health care services *directly* to patients.
- E. Law Enforcement or Corrections Officer Cancellation**  
Schools must cancel up to 100% of a Perkins Loan if the borrower has served full time as a qualifying law enforcement or corrections officer. To establish the eligibility of a borrower for the law enforcement or corrections officer cancellation provision, the school must determine that (1) the borrower's employing agency is eligible and that (2) the borrower's position is essential to the agency's primary mission.
- F. Child or Family Services Cancellation**  
Schools must cancel up to 100% of a Perkins Loan if the borrower has served full time as an employee of an eligible public or private nonprofit child or family service agency and has provided or supervised the provision of services to both **high-risk children** who are from **low-income communities** and the families of such children. To receive loan cancellation for being employed at a child or family services agency, a borrower must be providing services only to high-risk children who are from low-income communities. The borrower may also be providing services to adults, but these adults must be members of the families of the children for whom services are provided. The services provided to adults must be secondary to the services provided to the high-risk children. The Department has determined that an elementary or secondary school system or a hospital is not an eligible employing agency.
- G. Military Service Cancellation**  
Schools must cancel up to 50% of a Perkins Loan if the borrower has served a period of full-time active duty in the armed forces (that is, the U.S. Army, Navy, Air Force, Marine Corps, or Coast Guard), the National Guard, or the Reserves. The service must be in an **area of hostilities** or an **area of imminent danger** that qualifies for special pay under Section 310 of Title 37 of the U.S. Code. The cancellation rate for every complete year of qualifying service is 12.5% of the original principal loan amount.
- H. Volunteer Service Cancellation**  
Schools must cancel up to 70% of a Perkins Loan if the borrower has served as a Peace Corps or Americorps\*VISTA (under Title I, Part A of the Domestic Volunteer Service Act of 1973) volunteer. An authorized official of the Peace Corps or Americorps\*VISTA program must sign the borrower's cancellation form to certify the borrower's service. Americorps volunteers do not qualify for this cancellation unless their volunteer service is with Americorps\*VISTA. **An Americorps\*VISTA volunteer may only qualify for this cancellation if the Americorps\*VISTA volunteer elects not to receive a national service education award for his or her volunteer service. The Americorps\*VISTA volunteer must provide appropriate documentation showing that the volunteer has declined the Americorps national service education award.**