

INCOME-SENSITIVE REPAYMENT PLAN REQUEST

Federal Family Education Loan (FFEL) Program

SECTION 1: BORROWER IDENTIFICATION PLEAS	SE PRINT LEGIBLY IN BLUE OR BLACK INK
Please enter or correct the following information.	☐ Check this box if any of your information has changed.
Account Number:	Social Security Number:
Name:	Telephone – Primary:
Address:	Telephone – Alternative:
City, State, ZIP Code:	Email:
SECTION 2: ABOUT INCOME-SENSITIVE REPAYMENT	
	ou would under the Standard Repayment Plan.
shows you the estimated monthly payment and to and goals.	ole for, use Loan Simulator at studentaid.gov/loan-simulator. Loan Simulator tal loan costs, allowing you to choose the plan that best meets your needs ated, and income-based plans. Find out more at studentaid.gov/manage-
SECTION 3: REPAYMENT PLAN REQUEST	
plan begins. Return this form with one full month of consect of the form. If you are only paid once per month, please income-Sensitive Repayment (FFELP only) Changing from an Income-Based Repayment (IBR) Pla	n:
my current monthly IBR payment or \$5.00, whichever is grue to help me move from IBR to the new repayment plan I required request a one-month, reduced payment forbearance.	e in the amount of \$ (Amount must be at least \$5.00).
	STANDINGS, AUTHORIZATIONS, AND CERTIFICATIONS
(2) A deferment or forbearance may be ended early to process. My payment amount may be recalculated in the future to repayment schedule is not more than three times any other. (4) If I requested a reduced-payment forbearance of less that (5) I understand MOHELA will process the request for my F. (6) The Income-Sensitive Repayment Plan may extend the certain forgiveness programs, and by changing this plan, I m. (7) Even if I have satisfied future bills under my current reparapproval of this repayment plan. (See due date on Repayment (8) If you have a co-borrower, only one request is required. authorize, the entity to which I submit this request and its act telephone number that I provide now or in the future using a messages. I certify the information provided herein to be correct to the and I have an exceptional circumstance that makes me unabincluding the income-driven repayment plans. (Compare est studentaid.gov/loan-simulator.) Borrower Signature (Required)	pensure my loan pays out within the terms allowed and so any payment in the payment. If my payment is recalculated, I will be notified. an \$5.00 above, my forbearance will be granted in the amount of \$5.00. FELP loan(s) that MOHELA services. years I am scheduled to repayment my student loan debt, is not eligible for may pay more interest of the life of my loan(s). ayment schedule, my new repayment schedule will begin immediately upon ent Schedule once approved.) Signatures and income documentation are required from both borrowers. I gents to contact me regarding my request or my loans at any cellular nutomated telephone dialing equipment or artificial or prerecorded voice or text best of my knowledge demonstrating that I have reviewed all repayment plans be to repay my student loan(s) under all other plans imated payments for each plan by using Loan Simulator at
Co-Borrower Signature (If Applicable) SECTION 5: WHERE TO SEND THE COMPLETED RE	
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Return the completed form and any required documentation to: MOHELA, 633 Spirit Drive, Chesterfield, MO 63005-1243, Secure Upload at mohela.studentaid.gov, or fax to 866-222-7060. If you need help completing this form, call 1-888-866-4352.