

**REQUEST FOR DEFERMENT (Nursing, Law Enforcement, etc) – FEDERAL PERKINS LOAN  
UNIVERSITY OF CENTRAL MISSOURI**

(PLEASE COMPLETE IN INK)

<b>UCM ID NUMBER:</b>	<b>EMAIL:</b>
<b>NAME:</b>	Return form to: UCM – Perkins PO Box 800 Ward Edwards 1100 Warrensburg, MO 64093 Phone: 660-543-4661 Fax: 660-543-8007
<b>ADDRESS:</b>	
<b>CITY:</b> <b>STATE:</b> <b>ZIP:</b>	
<b>WORK PHONE:</b> <b>CELL:</b>	

COMPLETION OF THIS FORM DOES NOT GUARANTEE ELIGIBILITY. FOR MORE INFORMATION ON ELIGIBILITY REQUIREMENTS, PLEASE VISIT:  
[ucmo.edu/sfs/explore/repayingperkins.cfm](http://ucmo.edu/sfs/explore/repayingperkins.cfm)