

Nelnet
Attn: Enrollment Processing Dept
P.O. Box 82525
Lincoln, NE 68501-2525
Toll free Fax (866) 545-9196

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Account # (SSN): _____

Dear Student Loan Borrower:

We offer four repayment plans to allow maximum flexibility in the repayment of your loan.

Standard Plan: This option maintains the same payment amount throughout the term of the loan. If you choose this plan, **do not return this notice**. Your account will automatically be placed in this repayment plan.

Graduated Plan: This option offers low initial payments. The monthly payment amount will increase significantly over time. Choosing this option will increase the total amount of interest you will pay.

Income Sensitive Plan: This option bases your monthly payment amount on your gross monthly income. Choosing this option may increase the total amount of interest you will pay. This plan requires an annual renewal and verification of current income. This plan is limited to five years.

Extended Repayment Plan: This option offers you the opportunity to repay your loan on a standard or graduated plan over a period not to exceed **25** years. To be eligible for this repayment plan you must be a new borrower on or after October 7, 1998, and have total outstanding principal and interest greater than \$30,000.

If you would like to select the **Graduated, Income Sensitive, or Extended Repayment Plan**, please state your choice, **sign below**, and **return this notice** to the **correspondence address** listed above.

- If you request the Income Sensitive Plan, you must include proof of your monthly income with this notice.
- If you request the Extended Repayment Plan, you must also select either the Standard or Graduated Plan.

Plan Choice(s) (If choosing Extended, also list Standard or Graduated)

Your account **must be current** in order to be placed in the Graduated Plan or the Income Sensitive Plan. The authorization below is to place a forbearance on your account for the minimum time, if any, required to ensure your account is current at the time of payment plan initiation.

I agree to allow Nelnet to grant me a forbearance for all payments due and not paid before the beginning date of my repayment plan change requested above. If my account(s) is placed in forbearance, all unpaid interest will be capitalized. This **may** result in an increase in my monthly payment. My monthly statement will reflect any change to my payment amount.

Signature _____ Date _____