



American Education Services

P.O. Box 2461 Harrisburg, PA 17105-2461

Toll-free 1-800-233-0557 • TDD 717-720-2354

Fax 717-720-2774 • International 717-720-3500

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY TO DETERMINE
WHETHER YOU NEED TO TAKE ACTION

WHY WE ARE CONTACTING YOU

To provide you with an Economic Hardship Forbearance application for your SunTrust Private Student Loan(s).

WHAT ACTIONS YOU NEED TO TAKE

If you would like to apply for this forbearance, complete the application in its entirety and include the required documentation as detailed on the application.

ADDITIONAL INFORMATION YOU MAY FIND HELPFUL

- Returned forbearance applications are typically processed within 20 days of receipt. You will receive a letter indicating whether your request has been approved or denied.
- It is important to continue to make payments until your forbearance has been approved. If your loan(s) is or becomes delinquent, collection activities will occur until the forbearance has been approved.
- If you are currently using our Electronic Funds Transfer Service, Direct Debit, payments will continue to extract until your forbearance request is approved. Please note that if at any time you wish to suspend a monthly extraction, you will need to contact our office at least 3 business days prior to your due date.



Short on time? View your payment history, pay online, check your balance, and more, at aesSuccess.org/accountaccess. Account Access is the quickest and easiest way to manage your student loan account -- so you'll have more time to focus on the other priorities in your life.

SunTrust Bank Private Student Loan
Request for Forbearance
ALL ITEMS MUST BE COMPLETED OR INDICATE "N/A".



If you are experiencing financial difficulties which prevent you from making timely payments on your loan(s), you may be eligible for a forbearance. FORBEARANCE IS GRANTED AT THE OWNER'S OPTION. Forbearance is provided as an alternative to regular monthly payments. The forbearance may be granted in increments of one to six months for a maximum of twelve (12) monthly installments. Accrued and unpaid interest will be capitalized (added to the principal balance of your loan) and included in a new repayment schedule. If your account is delinquent, the forbearance can be used retroactively to cover the period of delinquency. PLEASE NOTE: ANY NEGATIVE REPORTS THAT WERE SUBMITTED TO ALL NATIONAL CREDIT BUREAUS WILL NOT BE REMOVED IF THE FORBEARANCE IS APPLIED RETROACTIVELY.

In order to qualify for Economic Hardship Forbearance, your educational loan debt must equal or exceed twenty percent (20%) of your gross monthly income. If the monthly payments for your privately guaranteed education loans divided by your monthly gross income is less than 0.20, you do not qualify for this forbearance.

Borrower Account Number _____ Borrower Name _____
Address _____ City _____ State _____ Zip Code _____
Email Address _____
Telephone Number _____ Alternate Telephone Number _____

I consent to the lender and any other owner, holder, servicer, guarantor or insurer of my account to contact me about my account via autodialer or similar device and/or using a prerecorded or artificial voice or message for any lawful purpose utilizing any cellular telephone number(s) I provide, even if I am charged for the call under my phone plan. Providing my mobile or alternative telephone number(s) and electronic mail address(es) to SunTrust is voluntary and I am under no obligation to do so. If I do not elect to provide a mobile or alternative telephone number, or electronic mail address, it will not affect the consideration or disposition of my forbearance request.

ARE YOU EMPLOYED BUT EXPERIENCING FINANCIAL DIFFICULTY? YES NO
ARE YOU EMPLOYED WITH ZERO INCOME? YES NO
ARE YOU UNEMPLOYED DUE TO ILLNESS OR DISABILITY? YES NO

DATES YOU ARE REQUESTING FORBEARANCE: From ____/____/____ to ____/____/____
MM DD YYYY MM DD YYYY

WHEN FILLING OUT DATES, PLEASE REMEMBER TO USE MONTH/DAY/YEAR. INCOMPLETE DATES WILL BE CAUSE FOR DENIAL

YOU MUST SUBMIT ALL APPLICABLE INFORMATION LISTED BELOW IN THE CATEGORY FOR WHICH YOU ARE REQUESTING THIS FORBEARANCE:

- IF EMPLOYED:
• 1040 Tax return (most recent year)
• Current Wage Statement (Check stub)
• W-2 form (most recent year)
IF UNEMPLOYED:
• W-2 form (most recent year)
• Statement from unemployment or school placement office
IF ILLNESS OR DISABILITY:
• Statement from physician regarding illness or disability

IF YOU ARE NOT ABLE TO SUBMIT THE ABOVE DOCUMENTATION TO SUPPORT YOUR REQUEST AS YOU HAVE NEVER BEEN EMPLOYED, YOU MUST SUBMIT A SELF-CERTIFYING STATEMENT OF EXPLANATION.

I hereby request forbearance for all of my SunTrust Academic Answer private loans. I certify I am unable to make payments according to the present terms of my loan(s). I understand that any unpaid interest will be added to the outstanding principal balance of my loan(s) at the end of the forbearance period. My monthly payments will be calculated at the end of the forbearance period based on the new principal balance (including capitalized interest, if any).

The owner reserves the right to obtain a copy of my credit report. Additional debt incurred or preferential payments to other creditors could result in the denial or termination of my forbearance request. I understand that should my situation under which I applied for forbearance change, I must notify American Education Services (AES). In addition to the forbearance for which I applied, I understand the forbearance will be granted on all Academic Answer private education loans serviced at AES which reflect a delinquency status. The above information and the information on the reverse side of this form is true and correct to the best of my knowledge. I understand that misrepresentation may lead to the denial of my request. I have read and understand and agree to the terms of this forbearance request.

Borrower Signature _____ Date _____

Return completed form to: American Education Services * P.O. Box 2461 * Harrisburg, PA 17105 2461

Detailed List of Revenue and Expenses

Section 1 - Average Monthly Revenues

TYPE OF INCOME		AMOUNT
1	Gross employment income	
2	Gross self-employment	
3	TOTAL	

Section 2 - Average Monthly Expenses

TYPE OF EXPENSES		AMOUNT
1	Rent or Mortgage	
2	Food	
3	Utilities	
4	Household Expenses	
5	Clothing	
6	Medical/Dental (non-reimbursable)	
7	Insurance Premiums	
8	Automobile Loan Payments	
9	Transportation Expenses	
10	Student Loan Payments	
11	Credit Card Payments	
12	Other ordinary and necessary living expenses	
13	TOTAL (add items 1 through 12)	

If you need additional space, please attach a separate sheet of paper.

Be sure to submit the applicable documents along with this form completed on both sides. If this information is not included with this application, your request for forbearance will be denied. Keep in mind that you are responsible for your payments until forbearance is granted.