



Oregon State
UNIVERSITY

Oregon State University

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TEACHER CANCELLATION PRIVILEGES FEDERAL PERKINS LOAN

The National Defense Education Act and subsequent amendments provide for partial or full cancellation of Federal Perkins Loans. Borrowers who perform certain services explained briefly below may qualify for cancellation benefits.

FULL-TIME SPECIAL EDUCATION TEACHER, including teachers of **infants, toddlers, children, or youth with disabilities** in a public or other nonprofit elementary or secondary school system.

Infants and toddlers with disabilities. Infants and toddlers from birth to age two, inclusive, who need early intervention services for specified reasons, as defined in section 672(1) of the Individuals with Disabilities Education Act, which defines infants and toddlers with disabilities as those who have a diagnosed physical or mental condition which has a high probability of resulting in developmental delay, or are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures in one or more of the following areas: cognitive development, physical development, language and speech development, psychosocial development, or self-help skills. The term **infants and toddlers with disabilities** may also include, at a state's discretion, individuals from birth to age two, inclusive, who are at risk of having substantial developmental delays if early intervention services are not provided.

Children and youth with disabilities. Children and youth from ages 3 through 21, inclusive, who require special education and related services because they have disabilities as defined in section 602(a)(1) of the Individuals with Disabilities Education Act, which defines "handicapped children" as children who are mentally retarded, hard of hearing, deaf, speech or language impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, or other health impaired children or children with specific learning disabilities who by reason thereof require special education and related services.

FULL-TIME TEACHER AT SCHOOL WITH HIGH CONCENTRATION OF STUDENTS FROM LOW-INCOME FAMILIES. Teaching service must be performed in a public or other nonprofit elementary or secondary school, which has been determined by the Department of Education to be a "school with a high concentration of students from low-income families." These schools are listed yearly in the "Directory of Low-Income Schools." If you are teaching at a school that is on the list one-year but not the next, you will remain eligible to receive a cancellation as long as you teach at that school.

FULL-TIME HEAD START preschool staff member with a salary comparable to local education agencies.

FULL-TIME TEACHER OF MATHEMATICS, SCIENCE, FOREIGN LANGUAGES, BILINGUAL EDUCATION or any other field of expertise that is determined by a state education agency to have a shortage of qualified teachers in that state. Employment must be in a public or other nonprofit elementary school. There is no provision for cancellation for teaching in postsecondary schools. The majority of classes taught must be in the borrower's field of expertise.

You must be employed, as a full-time teacher for a complete academic year (or two consecutive semesters). Two forms are required for each academic year. A deferment form should be submitted at the beginning of the school year and a cancellation form at the end of that year's service. Please notify the Student Loan Office if your employment status should change.

The loan is cancelled at the rate of 15% of the original loan amount for the first and second year of qualification, 20% for the third and fourth year, 30% for the fifth year, plus interest thereon, to a maximum of 100% of the total loan. The cancellation for Head Start is 15% of the original loan amount per year, plus interest thereon, to a maximum of 100% of the loan.

FEDERAL PERKINS LOAN

Teaching Service Deferment Request

FOR DEFERMENT ONLY – NOT FOR CANCELLATION

File this form with Oregon State University, Student Loan Office at the start of your year of teaching service. If you are eligible for cancellation privileges, you will be notified and your payments will be deferred. At the end of the school year, a cancellation form will be sent to you. If you have been a full-time teacher for the full school year, a portion of your loan will be cancelled.

PART I – TO BE COMPLETED BY BORROWER

NAME OF BORROWER		SOCIAL SECURITY NUMBER
STREET		TELEPHONE NUMBER ((HOME)
CITY	STATE	ZIP CODE
EXACT NAME OF SCHOOL WHERE EMPLOYED		JOB TITLE AND DESCRIPTION OF DUTIES (Attach details if necessary)
SCHOOL DISTRICT AND COUNTY		
CITY AND STATE		
ACADEMIC YEAR STARTNG (MONTH/YR)	ACADEMIC YEAR ENDING (MONTH/YR)	
CHECK APPROPRIATE BOX. (Explanation on back of this form)		
<input type="checkbox"/> FULL-TIME SPECIAL EDUCATION TEACHER <input type="checkbox"/> FULL-TIME TEACHER AT SCHOOL WITH HIGH CONCENTRATION OF STUDENTS FROM LOW-INCOME FAMILIES <input type="checkbox"/> FULL-TIME STAFF MEMBER IN HEAD START PROGRAM <input type="checkbox"/> FULL TIME TEACHER OF MATHEMATICS, SCIENCE, FOREIGN LANGUAGES, BILINGUAL EDUCATION OR OTHER SHORTAGE FIELD		
I declare that I am presently employed as a full-time teacher in a public or non-profit elementary or secondary school. I further declare that I am presently under contract and expect to continue teaching through the academic year or equivalent as stated above. I further understand and agree that if for any reason whether through my own doing or because of events beyond my control, I do not complete a full year of teaching service, I will immediately notify Oregon State University.		
SIGNATURE OF BORROWER		DATE

PART II – TO BE COMPLETED BY SCHOOL OFFICIAL

NAME OF SCHOOL	SCHOOL DISTRICT	COUNTY
ADDRESS		TELEPHONE
I certify that the above statements concerning service as a full-time teacher are correct.		
SIGNATURE AND TITLE OF SCHOOL OFFICIAL		DATE

PART III – TO BE COMPLETED BY OSU LOAN OFFICER

<input type="checkbox"/> APPROVED DATES: From _____ To: _____	
<input type="checkbox"/> DISAPPROVED REASON FOR DISAPPROVAL _____	
SIGNATURE OF LOAN OFFICER	DATE

RETURN COMPLETED FORM TO ADDRESS BELOW

OREGON STATE UNIVERSITY
 STUDENT LOAN OFFICE
 P.O. BOX 1086
 CORVALLIS OR 97339-1086