

Military Cancellation Addendum

Part 1-To Be Completed By Borrower

Borrower Name (Last, First, Initial):	Account Number:	Social Security Number:
Address:	City:	State:
	Zip:	Telephone Number:

Part 2 - To Be Completed By Employer

The borrower indicated above has applied for a cancellation of their student loan based on their service in the military. In order for a cancellation request to be honored the employer must respond to the following questionnaire.

	Yes	No
1 Is the above referenced borrower serving a period of full-time active duty in the armed forces (that is, the U.S. Army, Navy, Air Force, Marine Corps, or Coast Guard)?	<input type="checkbox"/>	<input type="checkbox"/>
2 Is borrower serving in an area of hostilities or an area of imminent danger that qualifies for special pay under Section 310 of Title 37 of the U.S. Code?	<input type="checkbox"/>	<input type="checkbox"/>
Please indicate the borrower's service dates. Please note: The borrower's Commanding Officer must certify the dates indicated.		
Service Dates:		
From: _____		
To: _____	Commanding Officer's Signature: _____	
From: _____		
To: _____	Commanding Officer's Signature: _____	
From: _____		
To: _____	Commanding Officer's Signature: _____	
	<input type="checkbox"/>	<input type="checkbox"/>

Certification By Commanding Officer required. I certify that the information stated above is true and correct.

Certifying Organization:	Signature of Authorized Official:	
Telephone No:		
Address:	Title:	Date Signed:
City:		
State: Zip:	Form can be faxed to: (517) 353-9640	Please return to: Loans Receivable Hannah Administration Building 426 Auditorium Rd Rm 140 East Lansing, MI 48824-2602