



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 a repayment option form for your privately insured loan(s).

WHAT ACTIONS YOU NEED TO TAKE

If you wish to apply, please complete the enclosed application and include the required documentation and all signatures as detailed on the application.

ADDITIONAL INFORMATION YOU MAY FIND HELPFUL

- If you receive the MGRS repayment schedule, please understand that your installment payment(s) may be higher than your current one(s) after completion of the two year period.
- Returned 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 alternative repayment option has been approved. If you are currently using Direct Debit, our electronic funds transfer service, please contact us at least 3 business days prior to your due date if you wish to suspend your monthly debit. If your loan(s) becomes delinquent, collection activities will continue until the account is brought current either by payment or a retroactively applied forbearance. Any forbearance retroactively applied will not result in the retraction of any negative reports on your credit file.



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.

PRIVATELY INSURED LOAN**Repayment Option Form**

BORROWER ACCOUNT NUMBER 3938886169
 BORROWER NAME HUNTER HOGAN
 ADDRESS 555 W MADISON St. Apt 2803
 CITY CHICAGO STATE IL ZIP CODE 60661
 TELEPHONE NUMBER () - 773-336-2220
 ALTERNATE TELEPHONE NUMBER () - _____
 WORK TELEPHONE NUMBER () - _____
 EMAIL ADDRESS HUNTER@HUNTERthinks.com

I consent to the lender and any other owner, holder, servicer, guarantor or insurer of my account contacting 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 the lender 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.

Section 1:

If your financial situation is making it hard to make timely payments on your education loan(s), you may want to consider a MODIFIED GRADUATED REPAYMENT SCHEDULE (MGRS). This schedule offers:

- 12 months of payments at 50% of the regular monthly principal and interest payment amount.
- 12 months of interest only payments equaling 31 days of interest.
- A return to full principal and interest payments for the balance of your loan period.

These payments may be higher than your previous monthly payments due to the 24 months of reduced payments listed above.

____ Yes, I would like to apply for the MGRS (If you are applying for the MGRS, you may skip Section 2 and go to section 3.

☒ No, I am unable to make at least 50% of my regular monthly payment for the following reasons:

UNEMPLOYED

Section 2:

If your financial difficulties prevent you from making timely payments under a Modified Graduated Repayment Schedule (MGRS) on your Privately Insured loan(s), you may be eligible for a Forbearance. Forbearance is granted at the owner's discretion for a few months as an alternative to regular monthly payments. The Forbearance is normally granted in increments of one to three months, with a maximum of twelve months during the life of the loan. The Forbearance period may be backdated to cover periods of delinquency, if any exist. However, any negative reports that were submitted to credit bureaus will not be removed if the Forbearance is granted retroactively.

____ Yes, I hereby request a Forbearance for all of my eligible Privately Insured loan(s). If the Forbearance is being requested for specific loans, please list the first disbursement dates of each: _____

Number of months you are requesting Forbearance: _____

Section 3:

You must continue making your regular monthly payments until the Forbearance or MGRS has been approved. You will receive written notice of the approval or denial of this request, after it has been processed.

I certify that I am unable to make payments according to the present terms of my loan(s). I understand that accrued and unpaid interest will be capitalized at the expiration of the MGRS or Forbearance period, and included in a new repayment schedule. This new repayment schedule will decrease my repayment period and increase my monthly payment amount.

I understand this request and all supporting documentation will remain the property of the lender, and/or its agent. 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 immediately notify AES Graduate and Professional Services. The above information 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 request. If I selected MGRS, I understand that I have agreed to amend the repayment terms of the original promissory note for my Privately Insured loan(s).

Borrower Signature _____ Date _____

*** SELECT EITHER MGRS OR ECONOMIC HARDSHIP FORBEARANCE, BUT NOT BOTH ***

**** ALL ITEMS MUST BE COMPLETED OR INDICATE "N/A". ANY INCOMPLETE ITEM WILL BE CAUSE FOR DENIAL. ****

THIS SECTION MUST BE COMPLETED FOR ACCOUNTS WITH CO-BORROWERS!

1st CO-BORROWER DAN HOGAN TELEPHONE NUMBER (713) 454-7660
ACCOUNT NUMBER 393886169 ALTERNATE PHONE NUMBER (713) 299-1365
ADDRESS 1137 ARLINGTON ST EMPLOYER NAME LORD & HOGAN LLC
CITY Houston STATE TX ZIP 77008 EMPLOYER TELEPHONE NUMBER (713) 523-4200
EMAIL ADDRESS DAN.HOGAN@LORDANDHOGAN.COM
CO-BORROWER SIGNATURE Dan Hogan DATE April 3, 2012

2nd CO-BORROWER NA TELEPHONE NUMBER (____) NA
ACCOUNT NUMBER NA ALTERNATE PHONE NUMBER (____) NA
ADDRESS NA EMPLOYER NAME NA
CITY _____ STATE _____ ZIP _____ EMPLOYER TELEPHONE NUMBER (____) _____
EMAIL ADDRESS _____
CO-BORROWER SIGNATURE _____ DATE _____

If you have additional co-signers, please be sure to attach their information to the application including their signatures.

RETURN COMPLETED FORM TO: American Education Services
P.O. Box 2461
Harrisburg, PA 17105-2461

FAX: 717-720-3916