

**HEROES Act Waiver Form**

Please provide your current contact information:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_ Email Address: \_\_\_\_\_

Nelnet Account Number or Social Security Number: \_\_\_\_\_

**INFORMATION ABOUT THE HEROES ACT**

Under the HEROES Act Waiver, you (or a spouse or other family member) may request to extend your reduced payment amount on your current Income-Driven Repayment (IDR) Plan. To be eligible, your loans must be within their recertification period, which is 120 days prior to your first increased payment due on your IDR Plan.

To qualify for the HEROES Act Waiver, you must meet one of the below qualifying conditions. Check which applies to you:

- I am currently on active duty during a war, other operation, or national emergency, as declared by the President of the United States.
  - List your operation: \_\_\_\_\_
  
- I am currently performing National Guard duty (i.e., called to active service by the President of the United States or Secretary of Defense for a period of more than 30 consecutive days) during a war, other military operation, or national emergency, as declared by the President of the United States.
  - List your operation: \_\_\_\_\_
  
- I am residing in an area that is declared a disaster area by any federal, state, or local official in connection with a national emergency.

If none of these apply, you are not classified as an affected individual under the HEROES Act Waiver. Contact us at 888.324.4027 to review other repayment options.

**By signing below, I am certifying that:**

- I am unable to submit the required application and income documentation to recertify my current IDR Plan due to meeting one of the conditions outlined above.
- By checking one of the qualifying conditions outlined above, I am an affected individual and request that my student loan servicer extend my reduced payment amount on my current IDR Plan for an additional 12 months.
- I will continue to make all scheduled monthly payments as indicated on my monthly statements.
- My request will not be processed if my loans are not within their recertification period (90 days prior to the end of the existing IDR Plan).
  - I am responsible for submitting the required application and income documentation to recertify my IDR Plan if my recertification period has expired.

Borrower signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-maker signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_