

CHILD OR FAMILY SERVICES CANCELLATION

Name of Borrower:		Account Number:
Address (Number, Street, Apt #)		Home Telephone Number:
Place X here if this is a new address	(City, State, Zip Code)	Work Telephone Number:
E-mail Address:		

PLEASE HAVE THIS FORM COMPLETED BY YOUR EMPLOYER AND ATTACH TO THE PRE/CANCELLATION CANCELLATION DEFERMENT REQUEST FORM. RETURN THIS FORM AND PERTINENT PAPERWORK TO:

UNIVERSITY OF SAN DIEGO LOAN ADMINISTRATION
5998 ALCALA PARK, HC ROOM 204
SAN DIEGO, CALIFORNIA 92110

EMPLOYER: Please answer each question as it pertains to your employee.
PLEASE CIRCLE ONE

- YES NO 1. Is this organization a public or private non-profit child or family service agency? Indicate which _____
- YES NO 2. Is the employee a full-time employee? If yes, when did full-time employment begin. _____
- YES NO 3. Is your employee providing, or supervising the provision of, services to high-risk children and their families who are from low-income communities? (Low-income communities are those in which there is a high concentration of children eligible to be counted under Title I of the Elementary and Secondary education Act of 1965, as amended.)
- YES NO 4. Are the high-risk children served individuals under the age of 21, who are low income or at risk of abuse or neglect, have been abused or neglected, have serious emotional, mental, or behavioral disturbances, reside in placements outside their homes, or are involved in the juvenile justice system.
5. What is your employee's job title? _____
(Attach Official Job Description)

I affirm that the information provided on this form is true and correct. I also understand that I must immediately notify the University of San Diego Loan Administration Office of any changes in my employment status.

Signature of Employee

Date

TO BE COMPLETED BY CERTIFYING OFFICIAL

Name of Agency: _____
Address: _____
Telephone Number: _____

I certify that the above information is true and correct.

Name of Certifying Official (Please Print/Type)

Signature of Certifying Official