University of California – Robert Noyce Teacher Scholars Repayable Scholarship Program
Request for Postponement and/or Cancellation

This form is intended to facilitate communication between the Robert Noyce Teacher Scholars Repayable Scholarship recipient and the University of California (and its loan service provider) so that appropriate action can be taken in response to the recipient’s circumstances, as indicated below, and pursuant to the terms of the Robert Noyce Teacher Scholars Repayable Scholarship Program. For postponement and cancellation requests, this form needs to be properly completed and submitted in a timely manner on an annual basis beginning at the end of the Grace Period.

CHECK ALL THAT APPLY:

Postponement
☐ I am currently fulfilling one of my years of Qualified Teaching Service and request postponement of repayment in anticipation of loan cancellation next year. (Complete and return Sections A and B.)

☐ I intend to fulfill my Qualified Teaching Service but am not currently employed by a high need educational agency; I request postponement of repayment. (Complete and return Section A.)

I understand that:
1.) I am obligated to fulfill my Qualified Teaching Service or repay the Robert Noyce Teacher Scholars Repayable Scholarship according to the terms of my promissory note.

2.) Interest accrues during periods of postponement. Accrued interest must be repaid unless it is cancelled upon the timely submission of the signed and properly completed and certified cancellation documentation.

3.) The period of postponement reduces the length of time for me to repay my loan in full if I fail to fulfill my Qualified Teaching Service.

Cancellation
☐ I have just completed one year of Qualified Teaching Service and request cancellation. (Complete and return Sections A and C.)

Repayment
☐ I no longer intend to fulfill my Qualified Teaching Service obligation and understand that I am obligated to repay the Robert Noyce Teacher Scholars Repayable Scholarship according to the terms of my promissory note. (Complete and return Section A.)

Please print or type:

Name
Address
City
Day telephone
Evening telephone

Program and Loan Nos. on billing statement
Check if new address
State
Zip
University of California campus that granted this loan(s).

Declaration: I certify that the information above is correct. I understand the terms and conditions of the Robert Noyce Teacher Scholars Repayable Scholarship Program.

Borrower’s Signature: Date Signed:

Return Completed Form to:
Cal Teach Program, UCSC
PB Sci Dean’s Office
1156 High Street
Santa Cruz, CA 95064
Section B – Request for Postponement of Repayment

By providing the following information, you are requesting that repayment be postponed while you are fulfilling a year of Qualified Teaching Service in a high need local educational agency as defined in your promissory note. During periods of postponement, billing will stop but interest will continue to accrue.

Upon completion of a full year of Qualified Teaching Service, submit Section C - Request for cancellation after one year of Qualified Teaching Service.

Along with Section B, please submit Section A.

Please print or type:

<table>
<thead>
<tr>
<th>Borrower’s Name</th>
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<tr>
<td>Legal Name of School</td>
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<td>County</td>
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<td>School District</td>
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<td>City</td>
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<tr>
<td>State</td>
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<tr>
<td>Zip</td>
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<tr>
<td>Borrower’s Job Title/Description</td>
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<tr>
<td>Borrower’s Qualifying Employment Period (must be at least one complete academic year and cover the requested period of postponement)</td>
</tr>
<tr>
<td>Beginning (MM/DD/YYYY)</td>
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<tr>
<td>and Ending (MM/DD/YYYY)</td>
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<tr>
<td>Borrower’s Signature:</td>
</tr>
<tr>
<td>Date Signed:</td>
</tr>
</tbody>
</table>

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Santa Cruz, CA 95064
To request cancellation, the following information must be certified by an official of the School or School District:

You may qualify for loan cancellation benefits, if, according to the terms of your promissory note, you are a full-time mathematics or science teacher serving in a high-need local educational agency as defined in section 201 of the Higher Education Act of 1965 (20 U.S.C. 1021). The high-need local educational agency serves an elementary or secondary school located in an area in which there is: (A) A high percentage of individuals from families with incomes below the poverty line; (B) A high percentage of secondary school teachers not teaching in the content area in which the teachers were trained to teach; or, (C) a high teacher turnover rate.

A signed and properly completed and certified request for cancellation should be submitted when you have completed a full year of Qualified Teaching Service, and at the end of each subsequent academic year of Qualified Teaching Service.

Along with Section C, please submit Section A, and, if you are requesting another year of postponement, Section B.

Please print or type:

<table>
<thead>
<tr>
<th>Borrower’s Name</th>
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<tbody>
<tr>
<td>Legal Name of School</td>
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<tr>
<td>Address</td>
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<tr>
<td>City</td>
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<tr>
<td>Borrower’s Job Title/Description (attach a copy if necessary)</td>
</tr>
<tr>
<td>Borrower’s Completed Qualifying Employment Period (must be at least one complete academic year)*</td>
</tr>
<tr>
<td>Began (MM/DD/YYYY) and Ended (MM/DD/YYYY)</td>
</tr>
<tr>
<td>Certifying Official’s Name and Job Title</td>
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Certifications:
By signing this form, I certify that this borrower was employed full time as a mathematics or science teacher in a high need local educational agency, as defined above, for a complete academic year during the dates listed.

I also certify that all of the information provided in the cancellation section of this form is true and accurate.

*Note: Altered dates must be initialed by the Certifying Official.

Signature of Certifying Official:

Date Signed:

This space is for the Institutional Seal. If not available, please provide official letter of certification.

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