

Financial Aid Deferral Request Letter

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Financial Aid Office Name]

[University/College Name]

[Office Address]

[City, State, Zip Code]

Dear Financial Aid Officer,

I hope this message finds you well. I am writing to formally request a deferral of my financial aid due to medical reasons that have arisen this semester. My name is [Your Name], and my student ID is [Your Student ID].

Due to [brief explanation of medical issue], I am unable to continue my studies as planned. My doctor has advised that I take a medical leave of absence to focus on my rehabilitation and recovery. I have attached relevant medical documentation to support my request.

I respectfully ask for a deferral of my financial aid for the upcoming term, as it is crucial for me to ensure that I am fully prepared to resume my education once my health improves. I sincerely hope to return to [University/College Name] in the following semester and continue my studies.

Thank you for considering my request. I appreciate your understanding and support during this challenging time. Please let me know if you require any additional information or documentation.

Warm regards,

[Your Name]

[Your Student ID]