

# Student Loan Deferment Request for Temporary Disability

Your Name

Your Address

City, State, Zip Code

Email Address

Phone Number

Date

Loan Servicer Name

Loan Servicer Address

City, State, Zip Code

Dear [Loan Servicer's Name],

I am writing to formally request a deferment on my student loans due to my current temporary disability. My loan account number is [Your Loan Account Number].

Due to my condition, I am unable to maintain regular payments at this time. I am currently seeking medical treatment and expect to return to normal activities in the near future.

Attached to this letter, you will find the necessary documentation from my healthcare provider confirming my temporary disability.

I would greatly appreciate your consideration of my request for deferment during this challenging time. Please let me know if you require any additional information or documentation.

Thank you for your understanding and support.

Sincerely,

Your Name