

ATTACHMENT 3

SAMPLE

**REQUEST FOR STUDENT LOAN REPAYMENT BENEFIT UNDER THE
STUDENT LOAN REPAYMENT PROGRAM
5 U.S.C. 5379**

Name		Social Security Number		
Title	Series/Grade/Step		Type of Appointment	
Total Amount of Student Loan Repayment Benefit Received to Date (Include the Requested Amount from this Request Form.)				
\$ _____				
Student Loan Repayment Benefit Amount Requested:	Student Loan Repayment Benefit for Year Number: (Circle One)			
\$ _____	1	2	3	4
	5	6	Other ____	
NOTE: Service Agreement must be attached to this Request form.				
Current Balance of Outstanding Loan: \$ _____				
NOTE: Official Documentation from loan holder documenting loan balance and type of loan must be attached to this Request form.				
Compensation:				
Base/Locality Pay	\$ _____			
Other Continuing Pay, e.g., PSP, retention allowance	\$ _____			
Other Payments, e.g., lump sum payments	\$ _____			
Student Loan Repayment Benefit Amount	\$ _____			
TOTAL COMPENSATION	\$ _____			
Recommending Official		Title		Date

Certification of Funds	Title	Date
Personnel Official	Title	Date
Approving Official	Title	Date
Effective Date:	Expiration Date:	