Notice of Eligibility for the Servicemembers Civil Relief Act (SCRA) Interest Rate Benefit

Name:	Loan Number:	(Please Print)	
(Please Print)		(Please Print)	
Section 2 (to be completed by the Commanding or	Personnel Office	er):	
I certify to the best of my knowledge and belief that the	e person named al	pove qualifies for th	ne benefit under the SCRA.
Military service orders issued on (MM/DD/YY):	/	/	
Military service begin date (MM/DD/YY):	. /	/	
Military service end date, if available (MM/DD/YY):	/	/	
Military Organization Information:			
Organization Name			
Street Address			
City	State		Zip
(
·			
Authorized Official Information:			
Name (please print)			
rianic (picase print)	Tide		

Mail this notice and/or your other similar documentation to Sallie Mae, P.O. Box 6566, Wilmington, DE 19804-6566 or upload it through your account at salliemae.com. If you have any questions, reach us at 855-534-2668. If dialing internationally, please call 877-224-9408.

Date

© 2024 Sallie Mae Bank. All rights reserved. Sallie Mae is a registered service mark of Sallie Mae Bank.

Signature