Revision Number: _____

# Student Loan Repayment Schedule
# NASA, John F. Kennedy Space Center

Name of NASA Employee: _____ SS#: _____

Name of Lending Institution: _____

Student Loan Number: _____

Bank Routing # (ACH): _____

Frequency and amount of NASA Payments: Bi-weekly: ☐ $ _____

Repayment start date: _____ Monthly: ☐ $ _____

Annually: ☐ $ _____

Other: ☐ $ _____

Total annual payment: $ _____ Amount of individual payment(s): $ _____

Authorization:

_____ _____

Human Resource Specialist Name (Date) Employee Name (Date)

| | | Actual Payment History | | | |
|---|---|---|---|---|---|
| | | | Outstanding NASA | Accounting | |
| Payment Amount | Payment Date | Cumulative NASA Payments | Payment Remaining | Technician | HRS |
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