



## Loan Repayment Assistance Program 2007 Application

Thank you for your interest in the Suffolk University Law School Loan Repayment Assistance Program (LRAP). If you have not already done so, please review the LRAP eligibility criteria found in the financial aid section of the Suffolk Law web site. To be considered for LRAP, the following application must be received by the Office of Financial Aid by June 1, 2007.

### BIOGRAPHICAL INFORMATION

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Suffolk Law Graduation Date: \_\_\_\_\_

Are you married?  No  Yes If yes, as of: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_  
If you have dependent children, please list their ages: \_\_\_\_\_

### EMPLOYMENT INFORMATION

If selected into the program, you will be required to submit an Employment Certification Form(s) signed by your supervisor that attests to your salary and job responsibilities. If you are applying prior to securing qualified employment, please indicate "seeking" in the employer line below and list the type of position you are seeking in the job title and responsibilities.

Employer: \_\_\_\_\_ Start Date: \_\_\_\_\_

Employer Address: \_\_\_\_\_  
\_\_\_\_\_

Job Title: \_\_\_\_\_ Annual Salary: \$ \_\_\_\_\_

Job Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

If Married, Spouse's Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_ Annual Salary: \$ \_\_\_\_\_

**PROJECTED INCOME**

List all sources of income for you and, if applicable, your spouse for 2007. If selected into the program, you will be required to submit 2006 federal tax returns and FAFSA Worksheets A & B initially, and annual tax returns thereafter.

For Calendar Year 2007

Total wages, salary, commissions, and fees from all employment \$ \_\_\_\_\_  
 All other taxable income (interest income, capital gains, bonuses) \$ \_\_\_\_\_  
 Untaxed income & benefits (IRA, housing, support from others) \$ \_\_\_\_\_  
 Other loan repayment assistance received (excluding Suffolk) \$ \_\_\_\_\_

**HOUSING INFORMATION**

Do you own a home?  No  Yes If yes, list Monthly Mortgage: \$ \_\_\_\_\_  
 Date purchased: \_\_\_\_\_ Current Market Value: \$ \_\_\_\_\_ Amount Owed: \$ \_\_\_\_\_

If no, please check applicable housing situation

Rent, with lease agreement  Live with/Rent from parents  Other \_\_\_\_\_  
 List monthly housing payment (if none, enter zero): \$ \_\_\_\_\_

**ASSET INFORMATION**

(If married, include spouse's assets)

Do you own other real estate?  No  Yes If yes, Value \$ \_\_\_\_\_ Debt \$ \_\_\_\_\_  
 List vehicle(s) and year: \_\_\_\_\_  
 Value of Checking Accounts: \$ \_\_\_\_\_ Value of Retirement Accounts: \$ \_\_\_\_\_  
 Value of Savings Accounts: \$ \_\_\_\_\_ Value of Stock/CD's/Other Investments: \$ \_\_\_\_\_

**EDUCATIONAL DEBT FROM SUFFOLK UNIVERSITY LAW SCHOOL**

Please list below each loan for you which you are or will be making monthly payments. If you are in repayment, this list must be accompanied by your most recent loan statements from your lender(s) showing your outstanding loan amount and payment history. If you have not yet begun to make payments on your loans, this list must be accompanied by a statement of loan balances from your lender(s). Include Federal Stafford Loans (Subsidized and Unsubsidized), Federal Perkins Loans, Suffolk Trustee Loans, and Private Loans. If you have consolidated your loans, this list must be accompanied by a breakdown of the loans included in the consolidation.

Loan Type	Lender	Servicer	Total Amount Borrowed	Monthly Payment
Subsidized Federal Stafford Loans				
Unsubsidized Federal Stafford Loans				
Federal Perkins Loans				
Suffolk Trustee Loans				
Private Loans				
Federal Consolidation Loan				
Federal GradPLUS Loan				

**EDUCATIONAL DEBT FROM OTHER INSTITUTIONS**

Please list below each loan for you which you are or will be making monthly payments. If you are in repayment, this list must be accompanied by your most recent loan statements from your lender(s) showing your outstanding loan amount and payment history. If you have not yet begun to make payments on your loans, this list must be accompanied by a statement of loan balances from your lender(s). Include Federal Stafford Loans (Subsidized and Unsubsidized), Federal Perkins Loans, Suffolk Trustee Loans, and Private Loans. If you have consolidated your loans, this list must be accompanied by a breakdown of the loans included in the consolidation.

Loan Type	Lender	Servicer	Total Amount Borrowed	Monthly Payment
Subsidized Federal Stafford Loans				
Unsubsidized Federal Stafford Loans				
Federal Perkins Loans				
Suffolk Trustee Loans				
Private Loans				
Federal Consolidation Loan				
Federal Grad PLUS Loan				

**SPOUSE’S EDUCATIONAL DEBT, IF APPLICABLE**

Following the same guidelines as above, please list below each loan for which your spouse is or will be making monthly payments.

Loan Type	Lender	Servicer	Total Amount Borrowed	Monthly Payment
Subsidized Federal Stafford Loans				
Unsubsidized Federal Stafford Loans				
Federal Perkins Loans				
Suffolk Trustee Loans				
Private Loans				
Federal Consolidation Loan				
Federal Grad PLUS Loan				

**PERSONAL STATEMENT AND RESUME**

Attach to this application a personal statement and resume. Your personal statement should include the type of public service work you are/will be doing, why you have chosen this field of work, why you feel you should be selected for LRAP benefits, and your financial need.

**CERTIFICATION**

1. I hereby certify that all of the information contained in this application is true and accurate to the best of my knowledge.
2. I agree to provide supporting documentation of the information listed on this application, if requested.
3. I certify that all LRAP funds received will be used for the express purpose of repaying student loans borrowed for attendance at Suffolk Law.
4. I agree to notify the Office of Financial Aid in writing within 30 days of any change in my employment. If, upon such notice, I am no longer in a position which qualifies for LRAP benefits, I understand that future award benefits will cease.
5. I understand that if I default on any of my educational loans I will be terminated from the Loan Repayment Assistance Program.
6. I agree to notify the Office of Financial Aid in writing within 30 days if I receive a deferment or forbearance on student loans from my lender and/or if my loan payments are reduced after LRAP benefits are calculated.
7. I agree to notify the Office of Financial Aid in writing within 30 days of any change in income, employment, marital status, or if I file for bankruptcy.
8. I certify that I am not receiving any assistance in the repayment of any of my student loans from any source not reported on this form.
9. I understand that in order to receive initial funds from the LRAP program, I must provide the Office of Financial Aid with a copy of my 2006 federal taxes, Worksheets A & B, Employment Certification Form, current loan statements from all lenders showing debt and payment information, and a signed promissory note.
10. I understand that to receive future LRAP benefits, I must continue to meet all eligibility criteria and will provide requested documentation in a timely manner.
11. I understand the deadline for submitting a complete application is June 1, 2007. Please check boxes to certify the following required documents are included in this application:
  - LRAP Application, pages 1-4 (this form)
  - Loan debt information for all educational loans
  - Personal Statement
  - Resume
12. I certify that I have read and understand the material contained at <http://www.law.suffolk.edu/offices/finaid/lrap.cfm>, "Loan Repayment Assistance Program – General Information."

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Spouse's Signature, if applicable: \_\_\_\_\_ Date: \_\_\_\_\_

Submit your complete application to:  
Loan Repayment Assistance Program  
Office of Financial Aid  
Suffolk University Law School  
120 Tremont Street  
Boston, MA 02108  
Fax: (617) 305-3216