



**JOHN R. JUSTICE LOAN REPAYMENT APPLICATION
FOR PROSECUTORS AND PUBLIC DEFENDERS**
BANK OF NORTH DAKOTA
STUDENT LOAN SERVICES
SFN 59591 (01-2012)

Please type or print using dark ink. Keep a copy of this form and any documentation you send to Bank of North Dakota for your records.

MAIL COMPLETED APPLICATION AND REQUIRED DOCUMENTATION TO:

Bank of North Dakota • Attn: JRJ Grant Program • PO Box 5509, Bismarck, ND 58506-5509 • 1-800-472-2166 ext. 5653 • 1-800-643-3916 (TDD)

Section A. Certification

This project was supported by Grant No. 2011-RJ-BX-0048 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the SMART Office, and the Office for Victims of Crime. Points of view or opinions in this document are those of the author and do not represent the official position or policies of the United States Department of Justice.

I understand that an application packet will not be considered complete unless the following documents are submitted to Bank of North Dakota:

1. **Application:** Complete and sign the John R. Justice Loan Repayment Application for Prosecutors and Public Defenders.
2. **Proof of Employment:** Provide the Employment Verification section of the application to your employer for completion.
3. **Proof of Loans:** Submit a recent account statement for each loan listed in Section D.
4. **Proof of Income:** Submit a copy of your 2011 federal tax return.
5. **Consent to Release of Information:** Authorizes lenders to provide information, if needed, to Bank of North Dakota.
6. **Service Agreement:** Complete and sign the John R. Justice Loan Repayment Program Application for Prosecutors and Public Defenders Service Agreement.

I understand that the full application packet must be received by Bank of North Dakota no later than March 31, 2012.

I request that Bank of North Dakota repay (on my behalf) my eligible FFELP, FDLP, Perkins, FFELP and FDLP consolidation loan(s), up to the maximum amount for which I am eligible under the John R. Justice Prosecutors and Defenders Incentive Act.

I authorize my employer to provide employment information to Bank of North Dakota as identified in section C.

Information collected will only be used or revealed for research or statistical purposes and compliance with the request for information is not mandatory and participation may be terminated at any time.

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form is subject to criminal penalties. I certify that the information I have provided on this form is true and correct to the best of my knowledge.

Signature of Applicant _____ Date (mm/dd/yyyy) _____

Section B. Applicant Information

Last Name		First Name		Middle Initial		E-mail Address	
Street Address				City		State	Zip Code
Home Telephone Number (include area code)				Cell Telephone Number (include area code)		Date of Birth (mm/dd/yyyy)	
Employer Name							
Employer Street Address				City		State	Zip Code
Employer Telephone Number (include area code)				Applicant Work E-mail Address			
Are you employed full-time (not less than 75 percent of a 40-hour week prosecuting (prosecutors) criminal or juvenile delinquency cases or providing legal representation (public defenders) to indigent persons in criminal or juvenile delinquency cases)?				Are you licensed to practice law?			
Yes <input type="checkbox"/> No <input type="checkbox"/>				Yes <input type="checkbox"/> No <input type="checkbox"/>			
State(s) and license number(s) in which you are licensed to practice law:							
State		License Number		State		License Number	

Section C. Employment Verification

The above named employee has applied for benefits through the John R. Justice Grant Program administered by Bank of North Dakota. Please complete the following information and return to applicant.

Job Title of Employee		Date of Hire (mm/dd/yyyy)	
Is the applicant employed full-time (not less than 75 percent of a 40-hour week prosecuting (prosecutors) criminal or juvenile delinquency cases or providing legal representation (public defenders) to indigent persons in criminal or juvenile delinquency cases)?			
Yes <input type="checkbox"/> No <input type="checkbox"/>			
Name of Organization		Office Location (City) of Applicant	
Name of Authorized Official		Signature of Authorized Official	

Section D. Education Loan Indebtedness

List below the lender(s) and outstanding balance(s) of your student loan debt. **If Bank of North Dakota is your lender, please indicate in Lender Name only. No other information is required.**

Lender Name	Telephone Number (include area code)		
Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		
Lender Name	Telephone Number (include area code)		
Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		
Lender Name	Telephone Number (include area code)		
Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		
Lender Name	Telephone Number (include area code)		
Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		
Lender Name	Telephone Number (include area code)		
Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		
Lender Name	Telephone Number (include area code)		
Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		
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Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		
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Account Number or Social Security Number	Outstanding Balance \$		
Lender Name	Telephone Number (include area code)		
Street Address	City	State	Zip Code
Account Number or Social Security Number	Outstanding Balance \$		