

### Loan Repayment Assistance Program-January 2014 Renewal Application

If you are interested in renewing your Suffolk University Law School Loan Repayment Assistance Program (LRAP) benefit, please complete and return the following information and documents to the Office of Financial Aid by January 21, 2014:

- LRAP Renewal Application (this form)
- Loan Documentation Form
- Loan servicer documentation
- Employer Certification Form (and Employer Certification Form for spouse, if applicable)
- Promissory Note (if not on 'Reimbursement Plan')

In order to complete the forms correctly, please be sure to read the Loan Documentation Instructions and Sample Loan Documentation forms

### **BIOGRAPHICAL INFORMATION**

Name	<del></del>		
		Work Phone	
Email Address		Suffolk Law Graduation Date	
Are you married?No	Yes If yes, as of	Spouse's Name	
Total Principal Due for Spou	ıse's Educational Loans (	provide documentation):	
EMPLOYMENT INFOR	MATION		
	MANON		
Employer		Start Date	
Employer Address			
ob Title		Annual Salary	
ob Responsibilities			
f married, spouse's employ	er		
		Annual Salary	

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Name	Date		
PROJECTED INCOME			
List all sources of income for you and, if applicable, your spo	ouse for calendar year 2014.		
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)	\$		
Do you own a home? No Yes  If yes, value: Debt  Date purchased Current Market Value  If no, please check applicable housing situation:  Rent, with lease agreement Live with/Rent from	Amount Owed n parentsOther		
List monthly housing payment (if none, enter zero)  ASSET INFORMATION			
Do you own other real estate?NoYes If yes, value	Debt		
List vehicle(s) and year			
'alue of Checking AccountsValue of Retirement Accounts			
alue of Savings AccountsValue of Stock/CDs/Other investments			

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#### **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.
- 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(s) and/or if my loan payments are reduced after LRAP 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 to receive future LRAP benefits, I must continue to meet all eligibility criteria and will provide requested documentation in a timely manner.
- 10. I understand the deadline for submitting a complete application is January 21, 2014. Failure to submit an application will result in my termination from the Loan Repayment Assistance Program.

Please check below to certify that the following required documents are included in this application:  LRAP Renewal Application, pages 1-3 (this form)  Loan Documentation Form  Loan servicer documentation  Employer Certification Form (and Employer Certification Form for spouse, if applicable)  Promissory Note (if not on 'Reimbursement Plan')				
I certify that I have read and understand the materi Program – General Information" located at: <a href="http://">http://</a> Applicant's Name	/www.law.suffolk.edu/offices/finaid/lrap.cfm			
Applicant's Signature	Date			
Spouse's Signature, if applicable	Date			
Submit your complete renewal application to:	Loan Repayment Assistance Program			

Office of Financial Aid

120 Tremont Street

Boston, MA 02108

Suffolk University Law School

Last Revised: 12/10/2013

G/LRAP/LRAP Winter 2014/LRAP Renewal Application January 2014

Except for the Promissory Note,

via email: lawfaid@suffolk.edu

or by fax: (617) 305-3216

All documents may also be submitted