

**2023-2024 LRAP APPLICATION (NEWARK)**

Due: March 1, 2024

**APPLICANT INFORMATION**

Name: \_\_\_\_\_  
Last First MI

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

Telephone: ( ) \_\_\_\_\_  
Cellular

Email: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_  
 State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
MM / DD / YYYY

Law Matriculation Year: \_\_\_\_\_

Law Graduation Year: \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Employer Name: \_\_\_\_\_

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

Supervisor Name: \_\_\_\_\_

Supervisor Telephone: ( ) \_\_\_\_\_

Position Title: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

Nature of Work: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SPOUSE INFORMATION**

Spouse Name: \_\_\_\_\_

Spouse Employer: \_\_\_\_\_

Spouse Salary: \_\_\_\_\_

**DEPENDENT INFORMATION**

Dependent Name

_____	_____	_____
<small>Last Name</small>	<small>First Name</small>	<small>Age</small>
_____	_____	_____
<small>Last Name</small>	<small>First Name</small>	<small>Age</small>
_____	_____	_____
<small>Last Name</small>	<small>First Name</small>	<small>Age</small>

**FINANCIAL INFORMATION – INCOME & ASSETS**

	<u>APPLICANT</u>	<u>SPOUSE</u>
<hr/>		
<b>2024 PROJECTED INCOME</b>		
Total Salary/Wages:	_____	_____
Annual Bonus:	_____	_____
<hr/>		
<b>OTHER INCOME</b>		
Gifts:	_____	_____
Alimony Received:	_____	_____
Child Support Received:	_____	_____
Capital Gains:	_____	_____
Interest Income:	_____	_____
Dividends:	_____	_____
Trust Income:	_____	_____
Other:	_____	_____
<hr/>		
<b>ASSETS (Current Value)</b>		
Home/Condominium/Cooperative:	_____	_____
Amount Owed on Property:	_____	_____
Stocks/Bonds/Trusts:	_____	_____
Retirement Funds:	_____	_____
Cash Value of Life Insurance Policy:	_____	_____
Cash/Savings/Checking:	_____	_____
Other:	_____	_____

**FINANCIAL INFORMATION - EXPENSES**

	<u>APPLICANT</u>	<u>SPOUSE</u>
<hr/>		
<b>2024 PROJECTED ANNUAL EXPENSES</b>		
<b>* ATTACH DOCUMENTATION OF THESE EXPENSES TO YOUR APPLICATION</b>		
Child Care/Elder Care:	_____	_____
*Undergraduate (prior) Educational Loan Payments:	_____	_____
*Spouse Educational Loan Payment:	_____	_____
*Alimony Paid:	_____	_____
*Child Support Paid:	_____	_____
*Other:	_____	_____
(Unreimbursed Medical/ Dental Expenses)		

**SPECIAL CIRCUMSTANCES**

Please describe and document any special circumstances you would like the Board to consider when reviewing your application

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Is this your first LRAP application? Y N

If yes, what year did you submit your first application? \_\_\_\_\_

Are you currently eligible for/receiving funds from any other loan repayment program? \_\_\_\_\_

If so, explain the source and amount of this funding \_\_\_\_\_

**LAW SCHOOL DEBT INFORMATION**

Please provide the names of each lender, and the type of loan you received from that lender during Law School. These should include your Federal Direct Loans, Perkins Loans, Graduate PLUS Loans and private educational loans associated with your attendance at Rutgers Law School-Camden.

LENDER/SERVICER	TYPE OF LOAN	Amount of Debt
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Attach the following to your application and submit by March 1, 2024**

- ✓ Print out of your one-page federal loan summary from [www.nslds.ed.gov](http://www.nslds.ed.gov)
- ✓ Copy of your **2023** Federal Tax Return, or submit an affidavit of Non-Filing
- ✓ Copy of your (& your spouse's) 2023 final pay stub(s), W2 forms, 1099 forms,
- ✓ Copy of your (& your spouse's) most recent pay stub (2024)
- ✓ Copy of your most recent monthly loan statement for **each** educational loan.
- ✓ Resume
- ✓ Proof of payment of loans with 2021-2022 LRAP award (prior recipient).

**CERTIFICATION**

	Applicant Initials	Spouse Initials
I/We certify that the loans listed on this application are currently in good standing.	_____	_____
I/We certify that all the information submitted on this application is true and complete to the best of my/our knowledge.	_____	_____
I/We understand that failure to provide all requested information in compliance with program guidelines and deadlines will result in my/our ineligibility to receive benefits under this program.	_____	_____
I/We agree that all funds received from LRAP will be used solely for the purpose of repaying my outstanding law school loans.	_____	_____
Applicant Signature: _____	Date: _____	
Spouse/Partner Signature: _____	Date: _____	

**EMPLOYMENT HISTORY (Provide information for all positions held since graduating from Rutgers Law School and attach current resume)**

	Start Date	End Date
Employer: _____	_____	_____
Job Title: _____		
Address: _____		
_____		
_____		
Employer: _____	_____	_____
Job Title: _____		
Address: _____		
_____		
_____		
Employer: _____	_____	_____
Job Title: _____		
Address: _____		
_____		
_____		
Employer: _____	_____	_____
Job Title: _____		
Address: _____		
_____		
_____		
Employer: _____	_____	_____
Job Title: _____		
Address: _____		
_____		
_____		

**Employment Certification Form**

**Part A: TO BE COMPLETED BY THE APPLICANT**

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

Job Title: \_\_\_\_\_

I, \_\_\_\_\_, authorize my employer, \_\_\_\_\_, to provide information requested in Part B to Rutgers Law School Newark's Loan Repayment Assistance Program.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Part B: TO BE COMPLETED BY THE EMPLOYER**

Please complete the information requested below concerning the employment status of the above-referenced individual, and return this form to the Rutgers Law School as soon as possible. If you have any questions regarding this matter, please contact our office at the above email address or phone number. Thank you for assisting our students in applying for Loan Repayment Assistance.

Dates of Employment: \_\_\_\_\_

Full Time:            Y    N

Hours per week: \_\_\_\_\_

Current Annual Gross Salary: \_\_\_\_\_

Increase Expected for 2024: \_\_\_\_\_

Value of Employee Benefit:

Retirement: \_\_\_\_\_

Loan Repayment Assistance: \_\_\_\_\_

Housing Allowance: \_\_\_\_\_

Life Insurance (Cash Value): \_\_\_\_\_

Other: \_\_\_\_\_

Please describe the nature of work performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer Name: \_\_\_\_\_

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

Employer Telephone: \_\_\_\_\_

Authorize Respondent Name: \_\_\_\_\_ Title: \_\_\_\_\_

Authorized Respondent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

IS YOUR ORGANIZATION QUALIFIED FOR TAX EXEMPTION AS DETERMINED BY THE INTERNAL REVENUE SERVICE? Y/N  
IF SO, PLEASE PROVIDE A COPY OF YOUR DETERMINATION LETTER OR CERTIFICATION OF YOUR TAX STATUS.

## LRAP Application Checklist

Have you completed and signed the LRAP Application?

Have you attached copies of these required documents to your application?

- ✓ Print out of your one-page **federal loan summary** from [www.nsls.ed.gov](http://www.nsls.ed.gov)
- ✓ Print out of any private loan statements from lender/servicer
- ✓ **2023 Federal Tax Transcript** from <https://www.irs.gov/individuals/get-transcript>, or submit an affidavit of Non-Filing
- ✓ Copy of your (& your spouse's) **2023 final pay stub(s), W2 forms, 1099 forms,**
- ✓ Copy of your (& your spouse's) **most recent pay stub (2024)**
- ✓ Copy of your most recent monthly loan statement for **each** educational loan.
- ✓ **Resume**
- ✓ **Proof of payment** of loans with previous LRAP award if applicable. **Prior LRAP recipients** must provide documentation which shows that previous awarded LRAP funds were applied to your law school debt?
- ✓ **Employer Certification Form**

**Application Deadline March 1, 2024**

*Submit application & supporting documentation to the address below.*

Tai Gedeon  
Rutgers Law School  
123 Washington Street  
Office 211  
Newark, NJ 07102