



**Loan Repayment Assistance Program (LRAP)**

217 N. Fifth Street Camden, NJ 08102 856-225-6406

**LENDER VERIFICATION**

Forward a copy of this form to the lender/servicer of each of your educational loans (incurred at Rutgers Law School-Camden)

**Part A: To be completed by the applicant**

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

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

I authorize the release of the information requested below to Rutgers Law School-Camden LRAP.

\_\_\_\_\_  
*Applicant=s Signature*

\_\_\_\_\_  
*Date*

\*\*\*\*\*

**Part B: To be completed by the lender**

Please provide the following information on all loans owed by the person referenced above and return this form to the Rutgers Law School-Camden LRAP.

**Type of Loan:** \_\_\_\_\_ **Original Amount Borrowed:** \_\_\_\_\_

**Capitalized Interest:** \_\_\_\_\_ **Interest Rate:** \_\_\_\_\_

**Initial Disbursement Date:** \_\_\_\_\_ **Unpaid Balance:** \_\_\_\_\_

**Required Monthly Payment:** \_\_\_\_\_

**1<sup>st</sup> Payment Due:** \_\_\_\_\_ **Final Payment Due:** \_\_\_\_\_

**Is this loan currently in Default/Deferment/Forbearance?** \_\_\_\_\_

**If yes, please explain:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Authorized Signature*

\_\_\_\_\_  
*Date*

**Name & Title:** \_\_\_\_\_

**Lender's Name:** \_\_\_\_\_

**Lender's Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_