



**Employment** (Please attach a current resume.)

Complete the information below for your current employer. If not currently employed, complete the information below for your prospective employer. To be eligible to receive LRAP funds, recipients must begin qualified employment no later than April 15, 2012, and must provide an updated Employment Verification form confirming employment by April 15, 2012.

Employment Category:  Civil legal aid  Other non-profit  Public defender  Prosecutor

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Applicant's Job Title: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Number of working hours per week: \_\_\_\_\_

Duties/Nature of Work: \_\_\_\_\_

Annual Salary as of April 15, 2012: \_\_\_\_\_

**Income and Expenses**

*Income*

Please report your income as reported on your 2011 federal income tax form 1040. If you filed jointly, please estimate the value for applicant only.

Wages and salaries	\$	-
Total interest income	\$	-
Total dividend income	\$	-
Business income	\$	-
Alimony/child support	\$	-
Unemployment compensation	\$	-
Rental income	\$	-
Trust fund income	\$	-
Other income (specify)	\$	-
<b>TOTAL</b>	\$	-

◀ Does this amount include a taxable LRAP?  Y  N

***Double click on the tables to fill in the information***

*Benefits*

<b>Benefit</b>	<b>Monthly Premium</b>	<b>Annualized</b>
Employer provided health insurance		\$ -
Employer provided life insurance		\$ -
Employer provided cafeteria plan		\$ -
Employer provided dental insurance		\$ -
Employer provided disability insurance		\$ -
Employer provided vision insurance		\$ -
Employer provided retirement benefits		\$ -
Any other employer provided benefits		\$ -
<b>TOTAL</b>	\$ -	\$ -

*Expenses*

<b>Expense</b>	<b>Monthly</b>	<b>Annulized</b>
Spouse/Domestic Partner's Education Debt		
Child Care Expenses		
Child Support Paid		
Employee Contributions to health insurance		

Please describe any other extraordinary expenses: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Other LRAPs**

Do you anticipate receiving any other loan repayment assistance in 2012?  Yes  No

If yes, list program and amount: \_\_\_\_\_

Is this amount included in your gross wages listed under Anticipated 2012 Annual Salary?  Yes  No

**Section B: Educational Debt**

To be completed by applicant for all post-secondary educational loans. If loans are consolidated with another individual, include only the amount in the applicant's name prior to consolidation.

Loans eligible for repayment assistance are undergraduate, graduate, and law school loans made by the government or an institutional provider for the education of the applicant. Family and personal loans for the education of the applicant may be considered if supported with documentation. Please list all of eligible loans and totals at the bottom of the page. Please indicate whether you are using income based or income contingent repayment for any loans.

<b>Lender/ Servicer</b>	<b>Outstanding Balance</b>	<b>Monthly Payment</b>	<b>Income Based</b>	<b>Income Contingent</b>
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
			☐	☐
<b>TOTAL</b>	\$ -	\$ -		

## Section C: CERTIFICATION

I understand that an application packet will not be considered complete unless the following documents are submitted by April 16, 2012:

1. **Application.** Complete and sign the 2012 OSB LRAP Application form.
2. **Proof of Employment.** Complete the top portion of the Employment Verification form, and have your employer complete the lower portion of the form. In addition, applicant must submit:
  - A copy of applicant's 2011 W-2 forms
  - Applicant's current resume
3. **Proof of Loans.** Submit a recent account statement for each loan that contains all the pertinent loan information in Section B of the Lender Verification form or complete the top portion of the Lender Verification form for each loan, have your lender complete the lower portion of the form, and submit a form for each loan. It is your responsibility to ensure all Lender Verification Forms are received by the Oregon State Bar by April 16, 2012.
4. **Personal Statement.** Attach a statement (no more than 2 pages) that describes your previous activities in the public interest field and your career plans for the next five years.

I understand that I may provide any additional information (no more than 1 page) by April 16, 2012, that is relevant to this application and will assist the Selection Committee (e.g., unusual or extraordinary expenses).

I certify that loans listed in Section B of this application are in good standing.

I understand that failure to provide all requested information in compliance with program guidelines and deadlines may result in my ineligibility to receive assistance under this program.

I agree to notify Oregon State Bar of any changes to my personal or financial situation, such as changes in employment, salary, address, etc. within one month of the occurrence.

I acknowledge I have read the LRAP Policies and Guidelines and agree any assistance that I receive is subject to, and governed by, these Policies and Guidelines. I understand these Policies and Guidelines may be modified in the future by the LRAP Advisory Committee.

I certify that all the information on this application is true and complete to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

The Oregon State Bar may use my name for LRAP publicity.

Oregon State Bar LRAP loans are determined without consideration of race, color, religion, sex, national origin or ancestry.