

**USC Gould School of Law  
Loan Repayment Assistance Program (LRAP)  
2021-22 ENROLLMENT APPLICATION**

**I. Personal Data**

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

USCID NUMBER \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY, STATE ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

JD GRAD MO./YEAR \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

MARITAL STATUS \_\_\_\_\_

DEPENDENTS (LIST NAMES AND AGES): \_\_\_\_\_

ARE YOU A PRIOR LRAP RECIPIENT?  YES or  NO

NAME, ADDRESS, AND PHONE OF PARENT OR OTHER RELATIVE WHO WILL ALWAYS KNOW YOUR CURRENT ADDRESS:

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

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**II. Employment and Income Information**

EMPLOYER \_\_\_\_\_

EMPLOYER TYPE:  GOV'T (LOCAL, STATE, FED)  501(C)(3)  501(C)(4)

EMPLOYER ADDRESS \_\_\_\_\_

EMPLOYER PHONE \_\_\_\_\_

JOB TITLE/DESCRIPTION \_\_\_\_\_

STARTING DATE \_\_\_\_\_ ANNUAL SALARY \_\_\_\_\_

SPOUSE'S NAME \_\_\_\_\_

SPOUSE'S EMPLOYER \_\_\_\_\_ JOB TITLE \_\_\_\_\_

STARTING DATE \_\_\_\_\_ ANNUAL SALARY \_\_\_\_\_ PHONE \_\_\_\_\_

SPOUSE'S OUTSTANDING FEDERAL STUDENT LOAN DEBT? \_\_\_\_\_

LIST ALL ADDITIONAL SOURCES OF INCOME AND AMOUNTS EXPECTED TO BE RECEIVED FROM OCTOBER 1, 2021 - SEPTEMBER 30, 2022 (12 MONTHS):

<u>SOURCE</u>	<u>AMOUNT</u>
_____	_____
_____	_____
_____	_____

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**III. Asset Information**

CASH/SAVINGS OWNED BY APPLICANT (AND SPOUSE) \_\_\_\_\_

MARKET VALUE OF HOME \_\_\_\_\_ AMOUNT STILL OWED \_\_\_\_\_

VALUE OF OTHER ASSETS (INVESTMENTS/REAL ESTATE/STOCKS, ETC.):

<u>ASSET</u>	<u>VALUE</u>
_____	_____
_____	_____
_____	_____

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**IV. Indebtedness and Expense Information**

NON-EDUCATIONAL DEBT OF APPLICANT AND SPOUSE (e.g., CREDIT CARD DEBTS, CAR LOAN, MORTGAGE, ETC.):

<u>LENDER</u>	<u>TOTAL DEBT</u>	<u>MONTHLY PAYMENT AMOUNT</u>

INCOME/EXPENSE ISSUES WHICH MAY BE UNUSUAL OR EXTRAORDINARY (may attach separate statement):

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**V. Certification**

All information on this application is true and complete to the best of my (our) knowledge. If provided with LRAP assistance, I agree to abide by all LRAP rules and regulations. Specifically, I agree to use LRAP funds for the sole purpose of making payments on approved educational loans. If asked by a Law School Officer, I (we) agree to provide proof of the information I (we) have given on this application. I (we) understand that I (we) must provide a complete copy of my (our) most recent federal income tax return, as well as other information required in Part V of the Loan Repayment Assistance Program description. I (we) agree to report any increase in salary or income or changes which may alter my eligibility, to the appropriate Law School official. I (we) further understand that regardless of the policies in effect at the time my participation in the Program begins, all subsequent policy revisions will apply to me (us) as well as new participants.

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Applicant's Signature Date

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Spouse's Signature Date

USC Gould School of Law  
Loan Repayment Assistance Program

**EMPLOYER CERTIFICATION FORM**

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

NAME \_\_\_\_\_

I authorize my employer \_\_\_\_\_

to provide the information requested in Part B to the University of Southern California Law School.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

**TO THE APPLICANT:** After completing the above section, submit this form to your employer. Your employer should then complete the section below and return this form directly to the Law School.

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

The above-named "applicant", a graduate of the USC Law School, has applied for a special Loan Repayment Assistance Program Award from the University of Southern California. As part of the application process, USC requires certification from the employer of the applicant's employment status.

Please complete the following information and return this form to [lawfao@law.usc.edu](mailto:lawfao@law.usc.edu). The applicant's Enrollment Application will not be complete without this Form. Please return the completed Form as soon as possible. If you have any questions, please do not hesitate to call the Law School's Director of Financial Aid at (213) 740-2523.

EMPLOYMENT START DATE: \_\_\_\_\_ # OF HOURS WORKED PER WEEK: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

BRIEF JOB DESCRIPTION-use space below or attach additional page:

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

SALARY/ANNUAL GROSS EXPECTED DURING PERIOD OF OCT 2021-SEP 2022: \_\_\_\_\_

OTHER COMPENSATION EXPECTED FOR SAME PERIOD (i.e., housing, loan forgiveness, etc.):

COMPENSATION AMOUNT

COMPENSATION PURPOSE

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

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\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
PRINTED NAME AND TITLE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
EMAIL ADDRESS

\_\_\_\_\_  
EMPLOYER NAME

\_\_\_\_\_  
EMPLOYER ADDRESS

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

IRS 501(C)(3) STATUS?  YES or  NO

Local, State, County, Federal Government Employer?  YES or  NO

## **AUTHORIZATION FOR RELEASE OF INFORMATION**

I authorize the Financial Aid Office of the University of Southern California Law School to obtain any information relating to the repayment of my educational loans from any lender or loan servicing agency who may be in possession of such information. This information may include, but is not limited to, my current status in the repayment of my loans, my payment history, and my outstanding balance and interest rate.

I understand that the information released to the Financial Aid Office of the University of Southern California Law School is for purposes of determining eligibility for the Law School's Loan Repayment Assistance Program.

<b>Full Name:</b>	
<b>Signature:</b>	
<b>Date Signed:</b>	

	<b>DIRECT STAFFORD LOAN(S) – SUB &amp; UNSUB</b>	<b>DIRECT GRADUATE PLUS LOAN(S)</b>	<b>DIRECT FEDERAL CONSOLIDATION LOAN(S)</b>	<b>PERKINS LOAN(S)</b>	<b>OTHER STUDENT LOAN(S) (Fed./Private) including undergraduate</b>
<b>LOAN SERVICER</b>					
<b>ORIGINAL LOAN AMOUNT BORROWED</b>					
<b>CURRENT OUTSTANDING BALANCE</b>					
<b>INTEREST RATE</b>					
<b>MONTH/YEAR REPAYMENT BEGINS/BEGAN</b>					
<b>REPAYMENT PLAN ( i.e., IBR, PAYE, etc)</b>					
<b>MONTHLY PAYMENT AMOUNT</b>					

**NOTE: USC Gould LRAP Assistance is provided according to the PAYE Repayment Plan**