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**Funding Year :** 2022

**Internal - Application # :**

**For Title - Do NOT Delete :** test

## **Louisiana Bar Foundation :**

### **Loan Repayment Assistance Program - 2022 Application :**

Application Deadline: February 11, 2022 Along with the information requested on this form, each applicant must submit the following: 1. a copy of your 2021 W2/1099 forms; 2. Lender Verification Forms (completed by applicant and lender; submitted by applicant); 3. Employer Certification Form (completed by applicant and lender; submitted by applicant); 4. a copy of your 2020 tax return; 2021 when available

#### **A. BIOGRAPHICAL INFORMATION :**

**First Name :** test

**Middle Name :** test

**Last Name :** test

**Street Address :** test

**City :** test

**State :** US-LA

**Zip :** test

**Home Telephone :** test

**Work Telephone :** test

**Work Facsimile :** test

**Email Address :** test

**LSBA Bar Number :** 1,111

**Admittance Date :** 2021-11-23

**Date of Birth :** 2021-11-23

**Law Degree From :** test

**Start Date :** 2021-11-23

**Graduation Date :** 2021-11-23

#### **B. EMPLOYMENT INFORMATION :**

**Employer :** test

**Phone** : test

**Street Address** : test

**City** : test

**State** : US-LA

**Zip** : test

**Job Title** : test

**Date of employment** : 2021-11-23

**Name of Supervisor** : test

**Hours worked per week** : 1.00

**Number of years as legal services attorney** : 1.000

## **Uploads :**

**2021 W-2 Upload** : forEmail.jpg

**2020 Tax Returns** : forEmail.jpg

**2021 Tax Returns (when available)** :

## **APPLICANT'S EMPLOYMENT CERTIFICATION :**

Please download the PDF located here (<https://raisingthebar.org/about-us-documents/grants-1/119-employment-certification/file>), complete Part A, have your employer complete Part B and upload.

**Please upload Employment Certification:** : forEmail.jpg

## **C. EDUCATIONAL INDEBTEDNESS :**

Please download the fillable PDF here (<https://raisingthebar.org/about-us-documents/grants-1/118-educational-indebtedness/file>) and save to your computer. Once complete, upload to the box below.

**IMPORTANT: IF LOANS HAVE BEEN CONSOLIDATED OR ARE PENDING CONSOLIDATION YOU MUST PROVIDE DETAIL BREAKDOWN OF EACH LOAN TYPE, AMOUNT, DATE, ETC. IF YOU ONLY PROVIDE INFORMATION ON A CONSOLIDATED LOAN, YOUR APPLICATION WILL NOT BE CONSIDERED.**

**ACKNOWLEDGEMENT:** While we are aware that federal student loan forbearance has been extended until January 2022, we ask that you complete this document with information as if loans are not in forbearance, or when your loans are out of forbearance, before the application due date, for the purposes of eligibility and decision making.

**Please Upload your Educational Indebtedness Document.** : forEmail.jpg

## **D. INCOME WORKSHEET :**

Please report estimated income for 2022, not including requested loan repayment income. You will be required to verify the accuracy of this information by submitting with the application copies of your W-2 statements and tax return. Failure to submit accurate information may result in ineligibility. Please note: the total will be automatically calculated for your Personal Income, Income Adjustment for Dependents and Expenses.

**Applicant's Wages and Salaries : 1**

**Overtime/Bonuses/Commissions : 1**

**Total interest income : 1**

**Total dividend income : 1**

**Alimony : 1**

**Child Support : 1**

**Unemployment compensation : 1**

**Rental Income : 1**

**Trust fund income : 1**

**Other income : 1**

**If "Other Income" please specify: : 1**

**TOTAL Personal Income : 10**

**Number of Dependent Children: : 1**

**\$\_\_\_\_\_ : income adjustment : 5000**

Income Adjustment = # of dependents x \$5,000

## **E. HOUSEHOLD EXPENSES :**

Provide a list of all household expenses (monthly average):

**Mortgage, Rent, Lease Payments : 1**

**Food & Utilities : 1**

**Insurance (health, car, home) : 1**

**Taxes (property, other) : 1**

**Medical/Dental Expenses : 1**

**Child Support : 1**

**Payments of other bills (credit cards) : 1**

**Other : 1**

**If "Other" please specify : 1**

**TOTAL EXPENSES : 8**

## **F. OTHER FACTORS :**

Provide any other information you may feel is relevant. For example, any other unusual debts you may have, such as spousal educational indebtedness. Also include any other financial burdens, for example anticipation of taking care of an elderly relative or other pending potential costs which may impact your financial stability in the coming year. : 1

## **G. ASSET INFORMATION :**

**Amount of cash or savings :** 1

**Retirement Accounts :** 1

## **H. LENDER VERIFICATION :**

Please download the PDF located here (<https://raisingthebar.org/about-us-documents/grants-1/120-lender-verification/file>) and save it to your computer. Complete Part A and send the form to each lender of your qualifying law school educational loans (see guidelines). Each lender must complete a separate form. Download the form as needed.

If a lender returns the verification back to you and not directly to Louisiana Bar Foundation, please upload it in one of the file upload fields below.

**Lender Verification #1 :** forEmail.jpg

**Lender Verification #2 :**

**Lender Verification #3 :**

**Lender Verification #4 :**

**Lender Verification #5 :**

**Lender Verification #6 :**

**Lender Verification #7 :**

**Lender Verification #8 :**

**Lender Verification #9 :**

**Lender Verification #10 :**

## **CERTIFICATION :**

I hereby certify that I have read all guidelines and that all of the information contained in this application is true and correct to the best of my knowledge. The applicant acknowledges that the LBF has made no representation about the taxability of the LRAP loan payments. I hereby certify that I will notify the LBF immediately should there be any change to my employment status or income.

**Signature: :** 1

**Linked to Profile Form :**

*Created by : renee@raisingthebar.org*

*Record ID # : 32997101*

*Last change : 2021-11-23T17:41:43+0000*

**C. EDUCATIONAL INDEBTEDNESS**

**IMPORTANT: IF LOANS HAVE BEEN CONSOLIDATED OR ARE PENDING CONSOLIDATION YOU MUST PROVIDE DETAIL BREAKDOWN OF EACH LOAN TYPE, AMOUNT, DATE, ETC. IF YOU ONLY PROVIDE INFORMATION ON A CONSOLIDATED LOAN, YOUR APPLICATION WILL NOT BE CONSIDERED.**

- 1.) Provide information on qualifying law school educational loans (see guidelines).
- 2.) Complete all requested information on each line as indicated below.
- 3.) Be sure to designate loan as undergrad, law school, MBA, bar review, etc.
- 4.) Attach documents to this application as necessary.
- 5.) If loan payments are deferred or in forbearance, provide the date the loan payment(s) are due. Failure to complete required information will result in ineligibility.

Indicate Type of Loan (Fed/Private; undergrad, law school, MBA, bar review, etc.)	Name/Address of Lender	Original Loan Amount	Current Balance	Current Monthly Payment	Loan Status If (In Payment, or Deferred)	Deferred, Payment Date
1. _____	_____	_____	_____	_____	_____	_____
	_____					
	_____					
2. _____	_____	_____	_____	_____	_____	_____
	_____					
	_____					
3. _____	_____	_____	_____	_____	_____	_____
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	_____					
4. _____	_____	_____	_____	_____	_____	_____
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5. _____	_____	_____	_____	_____	_____	_____
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6. _____	_____	_____	_____	_____	_____	_____
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7. _____	_____	_____	_____	_____	_____	_____
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8. _____	_____	_____	_____	_____	_____	_____
	_____					
	_____					
9. _____	_____	_____	_____	_____	_____	_____
	_____					
	_____					
10. _____	_____	_____	_____	_____	_____	_____
	_____					
	_____					
<b>TOTAL:</b>		_____	_____	_____	_____	_____

If you need more space, please note that extra pages are needed by TOTAL, and then download and complete an additional copy of this page to supply the further information.



**LOUISIANA BAR FOUNDATION  
LOAN REPAYMENT ASSISTANTANCE PROGRAM**

**Instructions:**

*The Applicant should complete part A and have his/her employer complete Part B. The employer should return the form to the applicant to be submitted with the rest of his/her application.*

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

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

I hereby certify that I will notify the LBF immediately should there be any change to my employment status or income.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

**PART B: To be completed by the applicant's employer.**

Dear Employer:

The individual listed above has applied for assistance from the Louisiana Bar Foundation's Loan Repayment Assistance Program. Please certify the applicant's employment status by completing the remainder of this form. When complete, please return the form to the applicant. If you have any questions, please contact Renee LeBoeuf at [renee@raisingthebar.org](mailto:renee@raisingthebar.org) or (504) 561-1046.

Thank you for your assistance.

Name of Employee Applicant: \_\_\_\_\_

Anticipated 2022 Annual Gross Salary: \_\_\_\_\_

Title of Position: \_\_\_\_\_

Number of hours applicant works per week: \_\_\_\_\_

I hereby certify that I will notify the LBF immediately should there be any change to the applicant's employment status or income.

\_\_\_\_\_  
Authorized Signature                      Name (printed) & Title                      Date

\_\_\_\_\_  
Name of Employer                      Address                      Phone



**LOUISIANA BAR FOUNDATION  
LOAN REPAYMENT ASSISTANCE PROGRAM**

**LENDER VERIFICATION**

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**PART A: To be completed by the Applicant.**

**Instructions:**

Please complete Part A and send the form to each lender of your **qualifying law school educational loans (see guidelines)**. Each lender must complete a separate form. Copy this form as needed.

Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Address and Phone: \_\_\_\_\_

I hereby authorize \_\_\_\_\_ (lender) to provide the Louisiana Bar Foundation with the information requested in Part B.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

**PART B: To be completed by the lender.**

Dear Lender:

The individual listed above has applied for assistance from the Louisiana Bar Foundation's Loan Repayment Assistance Program. Please complete the information on the next page and return both pages to Renee B. LeBoeuf, LBF Grants Manager, by email at [renee@raisingthebar.org](mailto:renee@raisingthebar.org), by fax at (504) 566-1926.

Thank you very much for your assistance.

