



University of Nebraska College of Law Loan Repayment Assistance Program (LRAP) Application

Applicant Contact Information

Full Name:			Date:
<i>Last</i>	<i>First</i>	<i>M.I.</i>	
Address:			
<i>Street Address</i>		<i>Apartment/Unit #</i>	
<i>City</i>		<i>State</i>	<i>ZIP Code</i>
Home Phone: ()		Work Phone: ()	
E-mail Address:			

Education

To be eligible you must have graduated from UNL with a Juris Doctor degree in 2006 or later.

Law College:		Address:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
Have you been admitted to the bar or will you be admitted to the bar within 12 months of entering this program?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	Date admitted:
					State:

***Please attach a copy of your transcript (either official or unofficial).**

Qualified Debt

Please fill out the following chart using the outstanding balance as of September 1st, 2009

“Qualified Debt” means debt incurred to pay your expenses of a legal education and that is owed to an institutional or governmental lender (college, university, state or federal government or commercial lender that regularly lends money).

1. Private debt (family or friends) and Bar Exam Loans **are not** qualified debt for the purposes of this LRAP.
2. Those with consolidated loans will have the LRAP award reduced by % of loans attributable to non-law school loans
3. Delinquent loans or those in deferment or forbearance will not be covered
4. Those who are delinquent or who have outstanding balances are not eligible until all accounts are current

List lender(s)* and debt incurred to pay expenses of *legal education only*.

Lending Institution #1:				Phone: ()		
Address:						
Is account in “current” status?*	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Qualified Debt Amount*:	\$	Monthly Payment:	\$
Lending Institution #2:				Phone: ()		
Address:						
Is account in “current” status?*	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Qualified Debt Amount*:	\$	Monthly Payment:	\$
Lending Institution #3:				Phone: ()		
Address:						
Is account in “current” status?*	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Qualified Debt Amount*:	\$	Monthly Payment:	\$

Current Employment

“Employed in public interest law” means full time employment (35+ hours) by a not-for-profit §501(c)(3) organization whose purpose is to provide direct legal services to indigent persons, the disabled, the homeless, the elderly, juveniles, immigrant populations, those deprived of civil or human rights, or dealing with protection of environment or animals. Employment must be law related and is limited to JD-required positions. **Government positions do not qualify.**

Company:	Phone: ()
Address:	Supervisor:
Job Title:	Hours/week*:

Description of your duties:

Income

“Income” means adjusted gross income (AGI) taken from the applicant’s federal income tax return with the following modifications:

1. Applicants with children may deduct from the AGI an amount equal to the personal exemption for federal income tax purposes for each dependant child.
2. Married applicants or those with a qualifying domestic partner will have their incomes averaged together

“Domestic Partner” means any person identified by the applicant as his/her domestic partner at the time of application or any person that the applicant is currently identifying as the applicant’s domestic partner for the purpose of receiving a benefit under any other program.

3. All graduates who graduated between May 2006 and August 2008 please complete **FORM A** below
4. December 2008 and May and August 2009 Graduates please report your **expected income** for next year November 1st, 2009 to October 31, 2010 in **FORM B**.

FORM A	SELF	SPOUSE/PARTNER	TOTAL
2008 Base Salary			
2008 Additional Compensation (e.g. bonus)			
Other 2008 Income Received (trust disbursements, dividends, etc.) Please include a short description.			

Income continued

1. If you did not work the entire year please note why and explain how your finances were impacted (medical leave, maternity, etc.)

2. If you worked fewer than 40 hours per week briefly describe why you did not work full time and explain how your finances were impacted.

3. Did your income change in 2009 and/or do you expect changes to it next year? If so, please explain.

4. Please attach your most recent W-2, your most recent tax return and a letter from your employer verifying your current employment and salary.

FORM B	SELF	SPOUSE/PARTNER	TOTAL
Expected Annual Base Salary Next Year (please report entire base salary)			
Expected Additional Employment Compensation (e.g. bonus) Next Year			
Expected Other Income Next Year (e.g. dividends, trust disbursements) Please include a short description.			

Assets

Please fill out the chart below.

1. Please use values as of September 1, 2009.

2. Do not include tax deferred retirement accounts or tax deferred college savings accounts (e.g. 401 K, IRA)

As of September 1, 2009...	SELF	SPOUSE/PARTNER	TOTAL
Value of Net Equity in Real Estate Owned (Fair Market Value minus existing mortgage owed)			
Net Value of Other Assets You Own (Automobile, etc. Don not include personal items such as clothes or minor items)			
Total Balance of Bank Accounts			

Assets continued

Total Value of Stocks			
Total Value of Bonds			
Total Value of Mutual Funds			
Total Value of Trust Funds			

Debt

Please fill out the following chart with outstanding balances as of September 1, 2009

As of September 1, 2009...	SELF	SPOUSE/PARTNER	TOTAL
All Undergraduate Educational Loans			
All Non-Law Graduate Educational Loans			
All Law Graduate Educational Loans			
All Other Debts – please include description (e.g. credit card debts, judgments, etc.)			

Additional Information

1. Please attach applicable documentation for your law graduate loans.
2. Using a separate sheet, describe any significant changes you anticipate to the data you provided above.
3. Using a separate sheet, please describe any additional information about your financial situation which you would like the Selection Committee to consider. (Extraordinary child care expenses, medical expenses, etc.)

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature:

Date:

Career Services Office University of Nebraska College of Law 179 Ross McCollum Hall P.O Box 830902 Lincoln, NE 68583-0902