

**SECTION 1 - APPLICANT INFORMATION** 

NAME

## The George Washington University Law School Office of Admissions & Financial Aid

700 20<sup>th</sup> Street, NW Washington, DC 20052 202-994-3437 (o) Irap@law.gwu.edu

## LOAN REPAYMENT ASSISTANCE PROGRAM (LRAP) 2025-2026 PROGRAM APPLICATION

ADDRESS				
CITY	STATE	ZIP CODE		
PHONE	Current, Active E-mail	Address:		
<b>Graduation Date from GW Law:</b>		GWID		
SECTION 2 - EMPLOYER INFO	ORMATION			
EMPLOYER NAME				
ADDRESS				
CITY	STATE	ZIP CODE		
PHONE		STARTING DATE		
POSITION TITLE		SUPERVISOR NAME		
SUPERVISOR		SUPERVISOR		
PHONE		E-Mail Address		
Is this full-time employment? (gr			☐ Yes	U No
Is this employer a non-profit, IRS	501(c)(3) or 501(c)(4)	organization?	☐ Yes	☐ No
Is this employer a government (fe	ederal, state, or local) o	organization?	☐ Yes	☐ No
If government employment, plea	se clarify the following	:		
<ul> <li>Executive Branch</li> </ul>			☐ Yes	∐ No
<ul> <li>Legislative Branch – Com</li> </ul>		nizations, Offices	☐ Yes	☐ No
<ul> <li>Legislative – Personal Of</li> </ul>	_		☐ Yes	☐ No
<ul> <li>Law Clerk to Federal, Sta</li> </ul>	te, or Local Judges		☐ Yes	☐ No
Will any part of this position invo	olve actively working o	n a political campaign?	Yes	☐ No
Is this a Public Interest Fellowship	that lasts at least 12 r	months?	☐ Yes	□ No
Is this employer a Legal Aid or Pu	_	ation, regardless of funding	Yes	☐ No
source or organizational structure				
Briefly describe your primary wo	-	•	ID degree, ex	plain
why the position is law-related (p	provide attachment if n	ecessary).		

	ENT FINANCIAL INFORMATION pay period (before taking out any deductions):	
Select Pay Period		onth)
	☐ Bi-Weekly (every other week) ☐ Weekly	
Student Loan Paymer	nts	
_	the amount you are paying toward Law School	
	include undergraduate or other graduate school	
loan amount		Per Month:
	al Student Loans for Law School	
	al Consolidation Loans which include Law School	
	te Education Loans for Law School	
	r file "My Aid Data" from <u>https://studentaid.gov</u> for all Feder ade from your lender a current cumulative payment history w	
your last payment.	nde from your tender a current cumutative payment history w	mich includes the date of
• • • • • • • • • • • • • • • • • • • •	ilar LRAP funding from another source?	es 🔲 No
	indicate the source of funding and amount of assistance:	es <b>—</b> 110
o ii yes, piease	indicate the source of funding and amount of assistance.	
POV 4 LOANIBE	EDAVMENT CONTACT INFORMATION	
	EPAYMENT CONTACT INFORMATION	know how to contact you
Provide the names ar	nd contact information for two individuals who will always k	know how to contact you:
Provide the names an Name:	nd contact information for two individuals who will always k  Name:	know how to contact you:
Provide the names an Name:  Address:	nd contact information for two individuals who will always k  Name:  Address:	know how to contact you:
Provide the names an Name: Address: City:	nd contact information for two individuals who will always k  Name:  Address:  City:	know how to contact you:
Provide the names and Name:  Address: City: State:	nd contact information for two individuals who will always k    Name:     Address:     City:     State:	know how to contact you:
Provide the names and Name:  Address: City: State: Zip:	nd contact information for two individuals who will always k  Name: Address: City: State: Zip:	know how to contact you:
Provide the names an Name: Address: City: State: Zip: Phone:	nd contact information for two individuals who will always h  Name: Address: City: State: Zip: Phone:	know how to contact you.
Provide the names and Name:  Address: City: State: Zip:	nd contact information for two individuals who will always k  Name: Address: City: State: Zip:	know how to contact you.
Provide the names an Name: Address: City: State: Zip: Phone: Email:	nd contact information for two individuals who will always h  Name: Address: City: State: Zip: Phone: Email:	know how to contact you
Provide the names an Name: Address: City: State: Zip: Phone:	nd contact information for two individuals who will always h  Name: Address: City: State: Zip: Phone: Email:	know how to contact you
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN	nd contact information for two individuals who will always he Name:  Address: City: State: Zip: Phone: Email:	
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN I certify that, to the b	Name:  Address:  City:  State:  Zip:  Phone:  Email:  T CERTIFICATION  est of my knowledge, the information I have provided in this	s application and the
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN I certify that, to the b associated attachment	Name:  Address:  City:  State:  Zip:  Phone:  Email:  T CERTIFICATION  est of my knowledge, the information I have provided in thints is true, accurate, and complete. I understand that provide in the interest of the information I have provided in the interest is true, accurate, and complete. I understand that provide	s application and the ling inaccurate or
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN I certify that, to the b associated attachmen misleading informati	Name:  Address:  City:  State:  Zip:  Phone:  Email:  T CERTIFICATION  est of my knowledge, the information I have provided in thin this is true, accurate, and complete. I understand that providen could result in denial of my application for an LRAP loan.	s application and the ding inaccurate or o. I also understand that
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN I certify that, to the b associated attachmen misleading informati if any of the informati	Name:  Address:  City:  State:  Zip:  Phone:  Email:  T CERTIFICATION  est of my knowledge, the information I have provided in this is true, accurate, and complete. I understand that provide on could result in denial of my application for an LRAP loantion included in this application becomes inaccurate because	s application and the ding inaccurate or n. I also understand that e of a change (deferral of
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN I certify that, to the b associated attachmen misleading informati if any of the informati loans, change in employees.	Name:  Address:  City:  State:  Zip:  Phone:  Email:  T CERTIFICATION  est of my knowledge, the information I have provided in this is true, accurate, and complete. I understand that provide on could result in denial of my application for an LRAP loant tion included in this application becomes inaccurate because bloyment, material change in income, etc.), I will contact the	s application and the ding inaccurate or n. I also understand that e of a change (deferral of the GW Law School
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN I certify that, to the b associated attachmen misleading informati if any of the informati loans, change in employees.	Name:  Address:  City:  State:  Zip:  Phone:  Email:  T CERTIFICATION  est of my knowledge, the information I have provided in this is true, accurate, and complete. I understand that provide on could result in denial of my application for an LRAP loantion included in this application becomes inaccurate because	s application and the ding inaccurate or n. I also understand that e of a change (deferral of e GW Law School
Provide the names an Name: Address: City: State: Zip: Phone: Email:  BOX 5 - APPLICAN I certify that, to the b associated attachmen misleading informati if any of the informati loans, change in employees.	Name:  Address:  City:  State:  Zip:  Phone:  Email:  T CERTIFICATION  est of my knowledge, the information I have provided in this is true, accurate, and complete. I understand that provide on could result in denial of my application for an LRAP loant tion included in this application becomes inaccurate because bloyment, material change in income, etc.), I will contact the	s application and the ding inaccurate or n. I also understand that e of a change (deferral of e GW Law School