



LAW

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The George Washington University Law School
Office of Admissions & Financial Aid
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**LOAN REPAYMENT ASSISTANCE PROGRAM (LRAP)
2026-2027 Employer Certification**

SECTION 1 APPLICANT INFORMATION To be completed by GW Alum/LRAP Applicant

NAME

ADDRESS

CITY

STATE

ZIP CODE

PHONE

Current, Active E-mail Address:

Graduation Date from GW Law:

GWID

SECTION 2 EMPLOYER INFORMATION To be completed by Authorized Employing Official

ORGANIZATION/AGENCY NAME

ADDRESS

CITY

STATE

ZIP CODE

PHONE

WEB SITE ADDRESS

EMPLOYEE HIRE DATE (mm/dd/yyyy)

GROSS ANNUAL SALARY

Is this full-time employment? (greater than 35 hours per week, average)

☐ Yes

☐ No

Do you require that a person in this position be a law school graduate?

☐ Yes

☐ No

Is this employer a non-profit, IRS 501(c)(3) or 501(c)(4) organization?

☐ Yes

☐ No

Is this employer a government (federal, state, or local) organization?

☐ Yes

☐ No

If government employment, please clarify the following regarding the applicant's position:

• Executive Branch

☐ Yes

☐ No

• Legislative Branch – Committees, Support Organizations, Offices

☐ Yes

☐ No

• Legislative – Personal Office of a Legislator

☐ Yes

☐ No

• Law Clerk to Federal State, or Local Judges

☐ Yes

☐ No

Will any part of this position involve actively working on a political campaign?

☐ Yes

☐ No

Is this a Public Interest Fellowship that lasts at least 12 months?

☐ Yes

☐ No

Is this employer a Legal Aid or Public Defender organization, regardless of funding source or organizational structure?

☐ Yes

☐ No

Briefly describe the employee's primary work responsibilities (or attach a standard job description for this position).

AUTHORIZING OFFICIAL COMPLETING FORM:

Printed Name:

Title:

Signature

Date