# LOAN REPAYMENT ASSISTANCE PROGRAM (LRAP)  
## 2020-2021 Employer Certification

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

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>PHONE</th>
</tr>
</thead>
</table>

Current, Active E-mail Address:  
Graduation Date from GW Law:  
GWID

### SECTION 2 - EMPLOYER INFORMATION – To be completed by Authorized Employing Official

<table>
<thead>
<tr>
<th>ORGANIZATION/AGENCY NAME</th>
<th>ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>PHONE</th>
<th>WEB SITE ADDRESS</th>
<th>EMPLOYEE HIRE DATE (mm/dd/yyyy)</th>
<th>GROSS ANNUAL SALARY</th>
</tr>
</thead>
</table>

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  
- Legislative Branch – Committees, Support Organizations, Offices  
- Legislative – Personal Office of a Legislator  
- 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:

<table>
<thead>
<tr>
<th>Printed Name:</th>
<th>Title:</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>