Loan Repayment Assistance Program (LRAP)  

Name ____________________________________________________  Student ID ____________________

Please use the ‘Loan Documentation Form’ to document the following information:

1) the monthly amount due[space] on each student loan (enclose documentation if the amount has changed since the last LRAP payment),
2) ___________________________
3) the principal balance remaining[space] on each student loan as of the date of the most recent loan payment, and
4) EACH of your student loan*[space] payments made[space] for the last six-month LRAP period. This would include payments actually made from January through June OR July through December. (For example: A payment due in July but made in June would be counted in payments for January through June).

*Please note that the LRAP program will cover only student loans. Any student loans which have been consolidated with non-education debt are not eligible loans under the LRAP program. Likewise, neither Bar Loans nor Parent PLUS loans borrowed for a recipient’s child are eligible for inclusion in the LRAP program.

Please provide copies of the appropriate servicer documents demonstrating principal amount remaining and loan payments made. Use the following requirements for acceptable documentation.

**ACCEPTABLE** LRAP Documentation:
- Statements demonstrating loan payments already made.
- Statements that show the principal amounts remaining on each loan (can be separate statement from statements of loan payments made).
- ALL DOCUMENTS MUST CONTAIN THE APPROPRIATE LOAN SERVICER LOGO TO INDICATE THAT IT IS AN OFFICIAL LOAN PAYMENT/BALANCE REMAINING STATEMENT.

**UNACCEPTABLE** LRAP Documentation:
- Statements from your bank account showing payment of loans.
- Documentation with no logo or other proof that it is an official statement from the servicer.

Please see Sample Loan Documentation Packet to learn how to complete the form(s).

**NOTE:** We receive hundreds of pages of documentation for each LRAP period. In order to accelerate the processing of your LRAP check, we ask that you review your documentation carefully to avoid duplicate or unacceptable documents.
**Loan Repayment Assistance Program (LRAP)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Student ID</th>
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If you have any questions on how to complete the ‘Loan Document Form’ or what constitutes acceptable documentation, please feel free to contact us at 617-573-8147. Telephone conversations are more useful for this purpose than communications by email.

**NOTE** – If you pay more than one student loan per month, please use multiple forms to list all payments. *Please see Sample Loan Documentation Packet to learn how to complete the form(s).*

Total number of loans paid per month: __________

This loan is number __________ of __________.

<table>
<thead>
<tr>
<th>Type of Loan (Federal Direct, Stafford, Consolidation, Perkins, Private, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Lender</td>
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</table>

<table>
<thead>
<tr>
<th>Name and Telephone Number of Servicer</th>
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<tbody>
<tr>
<td>Payment Plan Type (standard, extended, IBR, etc.)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Monthly Amount Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>Principal Balance Remaining on Loan</td>
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</table>

Please contact your loan servicer(s) in order to obtain acceptable documentation

**Please make appropriate notations and highlights on attached documentation from servicer(s) for ease of understanding. Please include explanations for anything out of the ordinary, including a change in your servicer or payment amount.**

<table>
<thead>
<tr>
<th>Date of Payment</th>
<th>Amount of Payment for each month</th>
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</table>

**TOTAL**

All documentation should be sent to: **Office of Financial Aid**
Suffolk University Law School
120 Tremont Street
Boston, MA 02108

Except for promissory notes for LRAP recipients accepted into the program prior to January 2013, documentation can also be sent by email to: lawaid@suffolk.edu or by fax to: 617-305-3215

I certify that the information provided on this form is true and accurate.

Signature ___________________________________________ Date ______________________

Any forms not completed according to the instructions provided above will not be processed.