

SETON HALL LAW SCHOOL
PUBLIC INTEREST LOAN REPAYMENT ASSISTANCE PROGRAM

2018 Application – All Applicants

Due November 30, 2018

This application is to be used for SHL graduates from the 2014 class forward. For those who graduated prior to 2014, please contact us at law_financial@shu.edu for additional information.

Applicant's Name:

SHU ID:

Address: (Street City, State, Zip):

Mobile Phone:

Work Phone:

Personal Email:

Seton Hall Law School JD Graduation Date (must be 2001 or later) Month/Year:

Dependent Children's Name & Age (if applicable):

Are you married? Yes No: Spouse's Name (if applicable):

The PILRAP Loan is available to SHL graduates who have an outstanding balance on federal or private loans taken to attend Seton Hall Law. Graduates with an outstanding balance owed to Seton Hall are not eligible for PILRAP consideration until such debt has been paid in full. Eligibility for PILRAP is available to those who are an attorney with a qualifying public interest organization. A qualifying public interest organization is defined as a non-profit organization that provides, directly or through public policy efforts, advocacy advancing the interests of those traditionally underserved by the legal system, or an organization (whether governmental or not-for-profit) that provides constitutionally mandated services to criminal defendants.

Graduates may receive Seton Hall Law PILRAP assistance for up to three years. The maximum loan amount is \$5,000. The program year runs from January 1 to December 31. PILRAP disbursements are made in January. PILRAP loans will be fully forgiven if the recipient remains in qualified employment for the full year. If the graduate does not remain in qualified employment for the full year, the loan will be repayable to Seton Hall Law School.

The following items must be submitted by November 30, 2018 to Seton Hall Law School, Office of Enrollment Services, Attention: PILRAP Committee, Third Floor, One Newark Center, Newark, NJ 07102.

- 2018 Public Interest Loan Repayment Assistance Program Application
- Signed copy of 2017 Federal Income tax returns for student and spouse (if applicable)
- Employer Certification Form(s)
- Detailed Job Description on employer's letterhead
- Copy of Loan Repayment schedule

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The maximum qualifying income for the 2018 application period is \$60,000. If a married PILRAP applicant files separate federal income tax returns from their spouse, only the applicant's income will be used in determining eligibility. If the applicant files a joint tax return, the applicant's income will be considered to be the greater of the applicant's income or the average of the applicant and the spouse's income.

EMPLOYMENT INFORMATION SUMMARY

(Attach a detailed job description on your organization's letterhead and the Employer Certification Form):

Applicant:

Employer:

Position Title:

Start Date:

Spouse:

Employer:

Position Title:

Start Date:

NOTE: *If you (or your spouse) will be employed by more than one employer during January-December of the coming year, a separate Employer.*

Certification Form is required for each employer.

Projected Income Summary for 2019

(If necessary, explain or break down the following on a separate sheet of paper)

Total gross wages, salary, and fees:

(Include all employment for the coming year, January – December. Also include additional part-time employment.)

All other taxable and untaxed income:

(e.g., interest/dividend income, employer bonuses, alimony, capital gains, gifts, trust income, child support)

Total employer-paid, state, or other loan repayment assistance:

(Include the amount expected over the coming year.)

Asset Information

Cash, Savings, and Checking

Home

Retirement Accounts

Other investments: Stocks, Bonds, CDs, other

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STUDENT LOAN DEBT INFORMATION

Note: In order to apply for the Federal Public Service Loan Forgiveness Program, if you have federal student loans that are NOT Direct Loans, you have to consolidate your federal student loans at www.studentloans.gov . These loans should be on an Income Driven repayment plan such as PAYE or IBR.

Please list all of your educational loan repayment obligations below and attach documentation of your current monthly repayment obligations as issued by the servicer. Loan payments must be current. **Any loan payments that you do not indicate below (or attached) will not be used to calculate your PILRAP eligibility.**

Loan Type:

Servicer/Lender:

Original Amount Borrowed:

Current Balance:

Monthly Payment Amount:

Total to be Paid in 2019:

Note: Loans must be in repayment status to be considered in your eligibility calculation for PILRAP benefits.

**** Please attach all loan statements to this form ****

Are any of the loans listed above in a deferment or forbearance status with the lender? If yes, which ones and when will you be expected to begin repayment on the loan(s)?

Spouse: Does your Spouse have any student loans? Yes: No:

Please list your spouse's student loans repayment obligations for 2019 (attach a separate sheet if necessary):

Loan Type:

Servicer/Lender:

Original Amount Borrowed:

Current Balance:

Monthly Payment Amount:

Total to be Paid in 2019:

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APPLICATION CERTIFICATION

1. I (we) hereby certify that all of the information contained in this application is true and complete to the best of my (our) knowledge.
2. I (we) agree to provide proof of the information presented on this application, if requested.
3. I (we) agree to notify the PILRAP committee **in writing** within thirty days if I (we) receive a deferment or forbearance on student loans from my (our) lender and/or if my (our) loan payments are reduced after PILRAP benefits are calculated.
4. I (we) agree to notify the PILRAP committee in writing within thirty days of any change in income, employment, or marital status, or if I (we) file for bankruptcy.
5. I (we) certify that this application is complete including the Employer Certification Form(s) and loan consolidation documentation and understand that **an incomplete application will NOT be acted upon** by the PILRAP committee and could result in the forfeiture of award eligibility.
6. I (we) certify that all PILRAP loan funds received will be used for the express and sole purpose of repaying student loans borrowed for attendance at SHLS.
7. I, the applicant, certify that I am not receiving any assistance in the repayment of my student loans from any source not reported on this application.
8. I certify that I am not delinquent or in default on any student loan and understand that my eligibility for PILRAP depends upon the continuous satisfactory repayment status of my student loans. I certify that I will provide proof of my satisfactory loan repayment status from my educational lenders, annually with my applications.
9. I certify that I understand that if I owe an outstanding balance on my student account at Seton Hall Law School that I am not eligible for PILRAP consideration until this balance is paid in full.
10. **Public Relations Authorization Release:** Please check one of the boxes below and sign and date this form. Your choice will not affect whether you receive a PILRAP award.

I give permission for Seton Hall Law School ("The Law School") to use my name and publicize the fact that I received a PILRAP Award for working at my current place of employment.

I am not willing to give permission for The Law School to publicize the fact that I received a PILRAP award and am only willing to allow the Law School to publicize the fact that a PILRAP award was issued to a graduate working at my current place of employment.

Applicant's signature:

Date:

Spouse's signature:

Date:

The **DEADLINE** for submission of a COMPLETE application is **November 30, 2018**. Submit your complete application to:

Office of Enrollment Services/PILRAP Committee
Seton Hall Law School
One Newark Center, Third Floor, Newark, NJ 07102

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APPLICANT EMPLOYER CERTIFICATION FORM

Part A: To be completed by the Applicant

If the PILRAP applicant has more than one employer, this form should be duplicated and completed by each employer. Self-employed applicants should contact the Office of Enrollment Services for additional instructions.

Name:

SHU ID:

I authorize my employer (listed below) to provide the information requested in Part B of this form to Seton Hall Law School.

Employer Name:

Signature:

Date

Part B: To be completed by the Applicant's Employer

The person named above has applied to the Seton Hall Law School Public Interest Loan Repayment Assistance Program (PILRAP). The program application requires certification by the employer of the applicant's employment status and salary. Please complete the following and return this form to the applicant. Due date for receipt of this form to Seton Hall Law School is **November 30, 2018**. Please complete the information on a timely basis to ensure that your employee receives full consideration for these benefits. Thank you.

Beginning date (or projected beginning date) of employment:

Projected annual Gross salary beginning January 1: \$

If known, projected annual salary beginning July 1: \$

In what month of the year are salary and/or cost-of-living increases usually given?

What is the employee's job title?

Benefits received in addition to salary (e.g., housing, food):

Does the employer provide loan repayment assistance to the employee? Yes or No

If yes, what is the annual amount? \$

Does your organization have IRS 501(c)(3) status? Yes or No

If yes, what is your EIN number?

I hereby certify that all of the information presented on this form is true and complete to the best of my knowledge.

Authorized Signature:

Date:

Print Name:

Title:

Name of Employer:

Phone Number

Address (Street, City, State, Zip):

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EMPLOYER CERTIFICATION FORM FOR APPLICANT'S SPOUSE (IF APPLICABLE)

Part A: To be completed by the Applicant's Spouse

If the PILRAP applicant has more than one employer, this form should be duplicated and completed by each employer. Self-employed applicants should contact the Office of Enrollment Services for additional instructions.

Applicant's Name:

SHU ID:

Applicant's Spouse Name:

SSN: XXX-XX-

I authorize my employer (listed below) to provide the information requested in Part B of this form to Seton Hall Law School.

Signature:

Date:

Part B: To be completed by the Applicant's Spouse's Employer

The applicant named above has applied to the Seton Hall Law School Public Interest Loan Repayment Assistance Program (PILRAP). The program application requires certification by the employer of the applicant's spouse's employment status and salary. Please complete the following and return this form to your employee. Due date for receipt of this form to Seton Hall Law School is November 30, 2018. Please complete the information on a timely basis to ensure that your employee's spouse receives full consideration for these benefits. Thank you.

Beginning date (or projected beginning date) of employment:

Projected annual Gross salary beginning January 1: \$

If known, projected annual salary beginning July 1: \$

In what month of the year are salary and/or cost-of-living increases usually given?

What is the employee's job title?

Benefits received in addition to salary (e.g., housing, food):

Does the employer provide loan repayment assistance to the employee? Yes or No

If yes, what is the annual amount? \$

Does your organization have IRS 501(c)(3) status? Yes or No

If yes, what is your EIN number?

I hereby certify that all of the information presented on this form is true and complete to the best of my knowledge.

Authorized Signature:

Date:

Print Name:

Title:

Name of Employer:

Phone Number:

Address (Street, City, State, Zip):