Temple University Beasley School of Law BARRACK PUBLIC INTEREST FELLOWSHIP PROGRAM APPLICATION

APPLICANT INFORMATION (Please print clearly)

NAME			
Last		irst	M.I.
CLASS OF			
PERMANENT ADDRESS			
	Number and Stre	et	
City	State		Zip
Phone Number (Home)	E-m	ail address:	
Are you a: new or re-applica EMPLOYMENT INFORMATIO Name of Employer*	DN	•	
Address			
City	State	Zip	Phone
Is this Employer: NONPROFIT	☐ GOVERNMENT	☐ OTHER (pl	ease explain on separate sheet)
Annual Salary** \$ On a separate sheet, please list an investment income, and income from		come, including	but not limited to, alimony,
Are you employed full time? Yes	s 🗅 No To qualify	for LRAP funds y	your employment must be full time.

- * An Employment Verification Form must be included with your application
- ** Income information for applicant and spouse must be verified. A copy of the most recent tax return is required for both the applicant and spouse.

APPLICATION DEADLINE: DECEMBER 11, 2020

STATEMENT OF LAW SCHOOL INDEBTEDNESS

Please list the lender, the total amount borrowed under each loan type, the dollar amount of monthly repayment obligations per loan type and the date repayment starts for each loan. Include only loans incurred while a law student.

		T	ı	
TYPE OF LOAN	LENDER	TOTAL AMOUNT BORROWED	MONTHLY PAYMENT	REPAYMENT START DATE
Federal Stafford				
Federal GRAD Plus				
Perkins				
Other - Please describe				
	the type of repayment option (PAYE), etc.) and your mo			e Based Repaymen
Type of repayment pla	pe of repayment plan: Monthly payment:			
If your loan repaymen	t has not yet started, please	e indicate when your pa	ayments will begin:	
	to submit a recent statemer payment and proof that you ent is acceptable.		=	
	repayment assistance from ral, state or employer spons a separate sheet.			. If yes, please
to a career in public se	sonal statement with your a ervice, the nature of your cu ng your application. Renewa	irrent position and anyt	thing else which you	feel will assist the
	MENTATION eted application form, loan t a copy of their 2018 Feder			
Barrack Public Interest	e above information is true Fellowship Program I am c n Administrator with any fo	bligated to report any	increases in income	during 2020
Date	 Signature			

BARRACK PUBLIC INTEREST FELLOWSHIP PROGRAM EMPLOYMENT VERIFICATION FORM

TO BE COMPLETED BY APP	PLICANT:
Name	
Address	
Telephone	(where you can be reached during the day)
I authorize my employer to pr	rovide the information requested below.
Signature	 Date
TO BE COMPLETED BY EMI	PLOYER:
Name of Organization	
Address	
Telephone	
Nature or type of organization	1
Does this organization qualify	for tax exemption status under IRS Code 501(c)?
,	nformation regarding the applicant's employment:
Annual Salary	
I certify that the above inform	nation is true and accurate as of this date.
Name	Title
Signature	Date
Return completed form to:	Temple University School of Law

Office of Financial Aid 1719 North Broad Street

Philadelphia, PA 19122 Fax (215) 204-9319