

2025 Renewal Application for
University of Oregon School of Law
Loan Repayment Assistance Program
for prior LRAP Recipients

Due Date: November 4, 2024, 11:59 p.m.
Please fill in blanks for all requested information
Incomplete applications may not be accepted
[Upload Signed and Completed Applications](#)
Questions? Email plpp@uoregon

Applicant contact information

Name: _____

Address: _____

Phone number: (home): _____ (work): _____

Email: _____

Address: _____

Eligibility

To remain eligible for LRAP benefits you must continue to be working in a qualifying public interest law job.

1. Has your employment information changed? Yes No

a. Job title: _____

b. Organization: _____

c. Work address: _____

d. Contact person at organization and job title (to verify employment):

e. Contact person's phone number: _____

f. Your start date: _____

g. Brief description of your duties: _____

Current salary:

1. Please list your current salary as well as other forms of income or compensation and describe if/how it has changed since you submitted your original LRAP application. _____

2. What was your 2023 **Adjusted Gross Income**? _____
3. What is your anticipated **Adjusted Gross Income** for 2024? _____
4. What is your spouse's or partner's anticipated total compensation for 2024?

Debt

1. What is your current debt load? _____
2. Are you enrolled in the new federal Saving on a Valuable Education (SAVE) Plan? If not, why not? _____
3. If you are not enrolled in repayment plan and are eligible for the SAVE plan, calculate and list the amount your monthly payment would be *if you were enrolled* SAVE Plan:

4. What is your total monthly payment on law educational debt? _____
5. What is your total monthly payment on non-law educational debt? _____

Financial Circumstances

1. Any other significant changes in your financial situation since your original LRAP application? Yes No

If you checked yes, please describe:

2. Have you enrolled in any other Loan Repayment Assistance Program?

Yes No

If you answered "yes," please answer the following:

- a. Name of the other LRAP _____
- b. Amount and dates of awards _____

Career Plans & Other Information

Have your career plans changed since you submitted your original LRAP application?

Yes No

If yes, please attach a brief essay describing your current plans.

Other Information

Please provide any additional information that you would like the LRAP Committee to consider:

I hereby certify that all statements made in this application are true.

Signature (E-signature Acceptable) Date

If you had any significant changes in your employment, please remember to include:

- Copy of W2
- Letter or email from your employer verifying employment and salary