

# The Caruso Family Loan Forgiveness Fund and Judge Harry T. Shafer Loan Repayment Assistance Fund

#### 2022-2023

### **Self-Qualifying Questionnaire and Eligibility Estimate**

Ap	plicant:	SSN:				
	1	(print name)				
Qu	alifying Criter	ia:				
1.	Are you a Pe	epperdine Law School graduate? Graduation Date	Yes	No		
2.	Did you pass	the Bar within two years of graduation?  Date State	Yes	No		
3.	•	en employed by a federal, state or local government agency profit organization for at least one-year?	Yes	No		
4.	Does this pos	sition utilize your law degree?	Yes	No		
5.	an adjusted g	ng individual's income level must not exceed gross income of \$75,000 OR the qualifying individual's mily income must not exceed an adjusted gross income Is this true for you?	Yes	No		
6.	finance studio	e outstanding educational loans that were borrowed to es at Pepperdine Caruso School of Law? Are these yment and in good standing? Have you made payments in the	Yes	No		
7.	-	bmitted all of the required documentation with your application?	Yes	No		
8.	During law so Union Rescue	chool, did you work in public service with the Legal Aid Clinic and Mission? If so, please explain the work experience. If not, please type of work experience you obtained.	Yes //or	No		
9.	You are awar	re that you may only apply for loan assistance through Pepperdine for a maximum of ten (10) years.	Yes	No		

If you answered "yes" to each of these questions, you may qualify for the Caruso Family Loan Forgiveness Fund or the Judge Harry T. Shafer Loan Repayment Assistance Fund.

Application materials should be returned to:

Pepperdine Caruso Law Office of Financial Assistance ATTN: Berenice Hernandez 24255 Pacific Coast Highway Malibu, CA 90263-4633



# The application deadline is April 15, 2022

I. PERSONAI	L DATA	
Name:		
Address:		
Home Telephone:	Work Telephone:	E-Mail:
Marital Status:		
Age of Dependents:		
Law School Graduat	ion Date:	
State Bar Examination State(s): (applicant must pass a state)	on Pass Date:	two years of graduation)
	you and your spouse's (if applicable) most vage earning statements (W-2) and any misc	
II. EMPLOYM	ENT INFORMATION	
Current Employer: _		
Employer's Address	: 	
Employer's Telepho	ne Number:	
Start Date:		
Full time:	Part time:	(please check one)
Annual Salary:		
Job Title:		



## III. PREVIOUS EMPLOYMENT INFORMATION

Previous Employer:		
Employer's Address	:	
Employer's Telepho	one Number:	
Start Date:		
Full Time:	Part Time:	(please check one)
Annual Salary:		
Job Title:		
	EMPLOYMENT INFORMATION  Inployer:	
Employer's Address	:	
Employer's Telepho	one Number:	
Start Date:		
Full Time:	Part Time:	(please check one)
Annual Salary:		
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## V. QUALIFYING LOANS

Spouse's Signature

In determining the applicant's educational loan repayment obligations, all educational purpose loans, approved and certified by the Caruso School of Law, or loans made by the Caruso School of Law shall be considered.

# **Loan Information**

#### ATTACH LOAN STATEMENTS

ATTACH LUAN STATEMENTS			
<b>INSTRUCTIONS:</b> Attach copies of the following documents to this application:			
Y Most recent monthly billing statement for each lender.			
Υ History of payments made in the last year (January- December 2021).			
Under penalty of perjury, I certify that all information on this application is true and complete to the best of my (our) knowledge. I understand that my application materials are due no later than: <b>April 15, 2022</b> .			
I agree to report to the Office of Financial Assistance any increase in salary and/or income and any other circumstance, which may affect my eligibility for this program.			
I authorize the Account Resolution Office to release my Perkins repayment history for the purpose of calculating my debt forgiveness.			
If I am selected as a recipient, I authorize Pepperdine University, Caruso School of Law to use my name in promotional information, press releases, news articles, brochures, and catalogs.			
Applicant's Signature Date			

Date



# **Employer Certification Form**

#### PART A: TO BE COMPLETED BY THE APPLICANT

Name:					
INSTRUCTION Pepperdine Universely and prior description for the	T B: TO BE COMPLETED BY THE APPLICANT'S EMPLOYER S: The above named individual has applied to the loan repayment assistance program at risty Caruso School of Law. The application requires employer certification of the individue employment status. Please complete the following information, attach a copy of the job is position, and return it to our office no later than April 15, 2022. If you have any questions operdine University Caruso School of Law Office of Financial Assistance at (310) 506-4633				
The above name	individual is acurrentformer employee. (please check one)				
Date employmen	began/will begin:				
Date employmen	ended (if applicable):				
Employment Sta	Full time: Yes No (please circle one) Part time: Yes No (please circle one) Leave of Absence: Yes No (If yes, give dates)				
Gross annual sal	y:				
Is a JD degree re	uired for this individual's position?YesNo				
Employer is a	_federal, state, or local government agency private, non-profit agency qualifying for tax exemption under IRS Code 501 (c)(3) or 501 (c)(4) *You must provide proof of tax-exempt status.				
Print Name	Title				
Signature	Date				
Telephone Num	ar.				