



LAW SCHOOL

HOWARD AND PHYLLIS EISENBERG LOAN REPAYMENT ASSISTANCE PROGRAM

LENDER CERTIFICATION FORM

APPLICANT INSTRUCTIONS: Please complete Part A of this loan information request form and forward the form to the holder of each of your educational loans incurred at Marquette University Law School. Fax completed form to Marquette Law School, 414-288-0200.

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Part A: To be completed by the applicant.

Name: _____ Social Security #: _____

I authorize the lender at _____ to provide the information requested in Section B to Marquette University Law School.

Applicant's Signature

Date

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Part B: To be completed by the lender.

Dear Sir or Madam:

The above-named applicant has applied for a special loan forgiveness program which requires information regarding any loans the applicant has borrowed from you. Please complete the required information and **fax it to our office at 414-288-0200** as soon as possible. Thank you for your help.

Type of Loan	Amount Borrowed	Amount Outstanding	Monthly Payment	Date First Payment Due	Last Payment Received	Interest Rate	Repayment Period

Is the applicant delinquent or in default? YES NO If yes, how many days? _____

Are the applicant's loans in deferment or forbearance? YES NO If yes, until when? _____

Comments: _____

Authorized Signature

Name (printed) and Title

Name of Lender

Date

Address

Telephone