



**Vermont Law School
Loan Repayment Assistance Program
Lender Verification Form**

APPLICANT: Please fill out the top portion of this form and forward it to your lender. A *separate* form is necessary for each educational loan. Please make copies of this form if you have more than one lender.

For the sole purpose of determining eligibility for the Loan Repayment Assistance Program I, _____
Please Print Name

_____ give permission to _____ to provide the
Social Security # Lender Name

information requested below to Vermont Law School. My account number is _____.

Signature

Date

LENDER: The graduate/alumni named above is applying to Vermont Law School's Loan Repayment Assistance Program. In order to determine eligibility, the information requested below is needed. You may attach a summary to this form or create duplicates if necessary.

Lender Name _____ Phone Number _____

Address _____

LOAN INFORMATION:

Date of Loan _____ Loan Type _____

Interest Rate _____ Amount Borrowed _____

Amount Owed _____ Monthly Payment _____

Date of Last Payment _____ Amount of Last Payment _____

Amount Past Due _____ Status of Loan _____

Loan repayment Program Type _____

Signature

Title

Date

Please return completed form to:
Vermont Law School
Financial Aid Office
PO Box 96
South Royalton, VT 05068