



Loan Repayment Assistance Program (LRAP) 2026 APPLICATION CERTIFICATION

Section E: CERTIFICATION

I certify that loans listed in Section B of this application are in good standing.

I understand that failure to provide all requested information in compliance with program guidelines and deadlines may result in my ineligibility to receive assistance under this program.

I agree to notify Oregon State Bar of any changes to my personal or financial situation, such as changes in employment, salary, address, etc. within one month of the occurrence.

I acknowledge I have read the LRAP Policies and Guidelines and agree any assistance that I receive is subject to, and governed by, these Policies and Guidelines. I understand these Policies and Guidelines may be modified in the future by the LRAP Advisory Committee.

I certify that all the information on this application is true and complete to the best of my knowledge.

Signature of Applicant

Date

_____ The Oregon State Bar may use my name for LRAP publicity.
(If Yes, Initial)

Oregon State Bar LRAP loans are determined without consideration of race, color, religion, sex, national origin, ancestry, or any other protected class.