

**PLEASE SUBMIT BY JULY 31, 2024**  
**The Loan Repayment Assistance Program of Minnesota**

600 Nicollet Mall, Suite 380  
Minneapolis, MN 55402  
Telephone: 612-278-6315  
Email: lrapdocs@gmail.com Webpage: www.lrapmn.org

**FORGIVABLE LOAN RECIPIENT  
VERIFICATION FORM  
April – June 2024**

**Employer completes Section A:** LRAP Minnesota requires employer certification of its recipients' employment and salary. Please complete this section of the form and return it to the employee.

\_\_\_\_\_  
Name of Employee

\_\_\_\_\_  
Name of Agency

\_\_\_\_\_  
Employee Job Title

**Dates of Employment:**

From: \_\_\_\_\_ To: \_\_\_\_\_

Monthly Gross Salary: \_\_\_\_\_

Annual Gross Salary: \_\_\_\_\_

Employee works FULL-TIME (at least 30 hours per week): \_\_\_\_\_ Yes \_\_\_\_\_ No

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

\_\_\_\_\_  
Signature of Employer

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

**Recipient Completes Section B:** Please attach verification of loan payments you have made between April 1, 2024 and June 30, 2024. Acceptable documentation is described in your Loan Agreement.

**Recipient Completes Section C:** Has your address or any income or payment information (salary, other sources of income, assets, amount of payments due, etc.) changed since you submitted your application?

If yes, please indicate as appropriate: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Certification**

The information on this form is true and complete to the best of my know knowledge. If asked by LRAP Minnesota, I agree to provide proof of the information provided on this form.

\_\_\_\_\_  
LRAP Recipient Signature

\_\_\_\_\_  
Date

*See Reverse Side*

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## FORGIVABLE LOAN RECIPIENT VERIFICATION WORKSHEET

April – June 2024

Name

Date

Please fill out employment verification form (on reverse side) and attach proof of payment.\*

	Lender Name	Date Paid	Amount Paid
1			\$
2			\$
3			\$
4			\$
5			\$
6			\$
7			\$
8			\$
9			\$
10			\$
11			\$

Total of payments made for this quarter\*\*

\$

LRAP Award Amount

\$

**Email verification and proofs to [lrpdocs@gmail.com](mailto:lrpdocs@gmail.com) (preferred) or send by mail.**

\*LRAP accepts the following documents as proof of payment:

- Copies of cleared checks
- Bank statements showing checks or electronic payments have cleared
- Lender statements showing payments indicated payments have cleared (**on-line payment confirmation alone is insufficient**).

\*\*Make sure "Total of Payments" is greater than or equal to "LRAP Award Amount" unless told otherwise.