

***Executive Director Certification of
LSC-LRAP Participating Attorney Employment and Good Standing
for the period April 01, 2017 – September 30, 2017***

Instructions:

In order for the second disbursement of the FY 2017 LSC-LRAP loan to be made and annual forgiveness to be received, this form must be completed by the Executive Director of the LSC grantee program at which the Participating Attorney is employed (or by the Executive Director's designee). A separate form is required for *each* attorney who is receiving LSC LRAP assistance in FY 2017.

Be sure to date this form! Once the form has been completed, it should be returned to the participating attorney for submission to LSC.

Participating Attorney (PA) Name:

LSC-Grantee (Program) Name:

CHECK ALL APPLICABLE BOXES:

The PA named above remained employed and in good standing with the program during the entire period from April 01, 2017 through September 30, 2017.

The PA named above did ***not*** remain in good standing with the program during the entire period from April 01, 2017 through September 30, 2017.

If the Participating Attorney named above is ***no*** longer employed with the program or did ***not*** remain in good standing with the program during this period, please state the reason and date:

Employee did not pass bar examination and left the program, effective _____(date).

Employee left program by his/her choice, effective _____(date).

Employee left program by program's choice, effective _____(date).

Other, please describe.

I certify that the above information is true to the best of my information and belief.

Executive Director or designee (PRINT NAME)

Title

Signature

Date