

PROOF OF SPOUSE'S EMPLOYMENT & WAGES

- If married to an employed spouse, provide their most recent pay stub as your proof of their employment and salary. If they are a recent hire and have not yet received a pay stub, submit their offer letter from their employer.

MISSION & SCOPE OF ACTIVITIES

- Materials issued from your employer describing its mission and scope of activities, or a letter from your employer with the same information.
- If your employer is an approved local or national government, you may provide a statement of your job functions instead.

EMPLOYER'S TAX-EXEMPT STATUS

- Verification of your employer's tax-exempt status.
- If your employer's tax-exempt status is not a 501(c)(3) or 501(c)(4), but rather the foreign equivalent, an explanation of the relevant country's tax code or similar information which can be used to establish foreign equivalency.
- Applicants who work for the US Federal, State, county, or city government agencies as well as for a public school or college do not need to demonstrate proof of their employer's tax-exempt status.

VERIFICATION OF LOAN DEBT (GSB AND NON-GSB LOANS)

- Verification of outstanding loan debt from lenders or services by providing the following:
 - Original disbursed loan amount
 - Outstanding loan balance
 - Proof of Repayment status
 - Verification that your repayment is in good standing with no missed or late payments
 - Next due date
 - Required monthly repayment on due date
 - History of previous loan payments
- If spouse has outstanding educational loans, verification of their loan debt is also needed. (Please refer to the sample loan summary posted on the GSB Loan Forgiveness website).
- Please provide billing statements and/or screenshots from the servicer's website for each loan to provide this information.

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 - Next due date
 - Required monthly repayment on due date
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PROOF OF CHILDCARE EXPENSES

- Proof of childcare expenses, if applicable. Please provide documentation, such as invoices and/or statements from a licensed childcare provider or proof of payment for such services if no invoice is available.

THANK-YOU LETTER: Upon request, applicants may be contacted by GSB Development Office to write a thank you letter to their donor. Thank you letters must be submitted prior to applicant's next renewal (6-month or annual).

If any materials, such as foreign tax statement or employer's mission and scope of activities, are not in English, a personal translation of the pertinent information must be provided.

C. EMPLOYMENT INFORMATION

You must be employed at least halftime (20 hours or more per week) in an organization that meets one of the following descriptions:

- An approved local or national government, or
- A qualified non-profit organization (such as an Internal Revenue Code approved section 501(c)(3) or 501(c)(4) organization, or a foreign equivalent) which aims to better society through constructive means and which is approved by the GSB.

QUALIFYING EMPLOYER NAME: _____

EMPLOYER ADDRESS: _____

DATE EMPLOYMENT BEGAN: _____ JOB TITLE: _____

JOB DESCRIPTION:

Do you work for another company/organization? Yes No
 If Yes, please provide the name of your other employer:

D. INCOME INFORMATION

On your Annual Application form you provided us with your expected gross salary for the twelve month period. We ask that you recomplete the section again below for the same twelve month period. If you have had any changes in salary, or have changed employment, please use the section below to provide updated information.

INCOME INFORMATION	APPLICANT	SPOUSE
TIME PERIOD: (MMDDYY)_____ TO (MMDDYY) _____		
GROSS WAGES/SALARY FROM QUALIFYING EMPLOYER (INCLUDE TAX-DEFERRED COMPENSATION SUCH AS 401K AND 403B):		
INCOME FROM ANOTHER SOURCE (I.E. ANOTHER EMPLOYER, SELF-EMPLOYMENT). PLEASE INDICATE NAME OF EMPLOYER AND GROSS WAGES/SALARY (INCLUDE TAX DEFERRED COMPENSATION SUCH AS 401K AND 403B):		
EXPECTED/ANTICIPATED BONUS:		
DATE OF EACH BONUS (MM/DD/YY):		
OTHER TAXABLE INCOME (INCLUDE INTEREST & DIVIDEND INCOME)		
EMPLOYER PROVIDED HOUSING ALLOWANCE		
DATE NEXT SALARY INCREASE IS EXPECTED (MM/DD/YY)		

E. ASSET INFORMATION

On your Annual Application form you provided us with your asset information for the twelve month period. We ask that you recomplete the section again below for the same twelve month period. If you have had any changes in your assets, please use the section below to provide updated information.

ASSET INFORMATION AND OTHER RESOURCES (VALUE AS OF TODAY).	APPLICANT	SPOUSE
CASH/SAVINGS/CHECKING ACCOUNTS		
STOCKS, BONDS, AND OTHER INVESTMENTS		
RETIREMENT ACCOUNTS (IRA, KEOGH, SEP, ETC.)		
OTHER ASSETS (PLEASE EXPLAIN): _____		
TRUST FUND VALUE		
HOME		
VALUE		
DEBT (MORTGAGE BALANCE)		
YEAR PURCHASED		
PURCHASE PRICE		
OTHER REAL ESTATE**		
VALUE		
DEBT (MORTGAGE BALANCE)		
YEAR PURCHASED		
PURCHASE PRICE		
BUSINESS VALUE		
BUSINESS DEBT		

** If you have additional real estate, please attach a separate document detailing the value, debt, year purchased, and purchase price.

F. SPECIAL CIRCUMSTANCES

Occasionally, the GSB MBA Nonprofit/Public Service Loan Forgiveness Program applicants have special circumstances related to their employment or financial strength that is not communicated in the required application materials. If you feel that there is any additional information that would be helpful for the GSB to review, please use the space provided below. Attach a separate page, if needed.



G. CERTIFICATION

All of the information provided is true and complete to the best of my knowledge. I will update information as needed and provide documentation if it is requested by an authorized official. By signing this application form, I am confirming that I have not had any change in my income and assets since submitting the annual application form that could impact the calculation of my award. **I will immediately report any change of employment or financial circumstance, which would affect this application.**

Applicant's Signature _____ Date _____

Spouse's Signature _____ Date _____

Please provide any additional information that may be applicable. Be advised that failure to mail all required documents may delay the processing of your application and affect your eligibility for GSB MBA Nonprofit/Public Service Loan Forgiveness Program funds.

Supplemental information may be required and will be determined on a case-by-case basis. Any change in employment or adjusted family income by the applicant will require a re-confirmation of eligibility. The GSB reserves the right to change eligibility guidelines and required application materials at any time. The discretion for eligibility in the Stanford GSB MBA Nonprofit/Public Service Loan Forgiveness Program lies entirely with the Financial Aid Office. Determinations of awards, once rendered, are final.

Typically, the process takes 5-7 weeks from the receipt of application to disbursement of funds. Applicants should continue to make required loan payments during the application process.

RETURN APPLICATION TO:

Graduate School of Business
Knight Management Center
Stanford University
Financial Aid Office
655 Knight Way, McClelland Building
Stanford, CA 94305
Fax 1.650.725.3328