Before You Begin

Gather all the information you will need before you start your application. For completion of this application, you will need access to a printer and scanner.

	AHLRP	LVNLRP	BSNLRP	HPLRP	LMHSPEP	MHLAP	STLRP	SLRP
Lender Statements During the application process, you must scan/ upload your lender statements. Upload your most recent (within thirty (30) days) lender statements with your name, the name of the lender, balance owed, account number, and monthly payment amounts. All information that you submit in this application must coincide with the information contained on the lender statement or the application will be considered incomplete.	X	X	X	X	X	X	X	X
Professional License, Registration If you are licensed, registered, or certified you must scan/upload proof of licensure, registration or certification. A California Board, Department or recognized registry must issue license, registration, or certification. **For LMHSPEP only:** Waivers are considered.	X	X	X	X	X	X	X	X
Proof of Honorable Military Discharge If you are a veteran, you must scan/upload proof of honorable discharge.	X	X	X	X	X	X	X	
Verification of Your Employment During the application process, you must download and print the Employment Verification Form (EVF). This form must be filled out and SIGNED by your supervisor or an appropriate designee. Then you must verify the information and upload the document to complete the application. **For STLRP only:** If you are working or proposing to work and multiple sites, you must upload one form for each site.	X	X	X	X	X	X	X	
Two Professional Letters of Recommendation Two (2) Letters of Recommendation must be SIGNED and DATED within six (6) months of the application deadline. The letters must be on letterhead or include the author's title, name of employer, mailing address, and phone number. It is recommended that at least one letter be from a supervisor. During the application process, you must scan/upload the signed letters of recommendation.	X	X	X	X	X			
Official Transcripts If awarded, you must submit your official transcripts as a condition of award. The transcript must show the health care-related degree conferred for the program to which you are applying. The transcripts must be submitted within 2 weeks of notification of award.	X	X	X	X				
Last two years of Federal Tax Returns You will be asked for information from the last two (2) years of Federal Tax returns. If awarded, you must submit a copy of your and your spouse's last two years of Federal Tax Returns. If you are listed as a dependent on someone else's tax returns, you must provide a copy of their Tax Returns. Tax Returns must be submitted within 2 weeks of notification of award.	X	X	X	X				
Community Service You will be asked to list any community service, volunteer activities and/ or professional organizations that you have been involved in the last five (5) years. During the application process, you have the option of uploading a letter or supporting documentation of community service involvement.	X	X	X	X				
Letter of Recommendation from Practice Site One (1) letter of recommendation, which must be SIGNED and DATED from a supervisor or authorized representative from the practice site within one (1) month or within thirty (30) days of the application submission. The letter must be on letterhead and must include the author's title, name of employer, mailing address, and phone number. During the provider's application process, the site must scan/upload the signed letters of recommendation in the SLRP Practice Site Certification Section.								X
Practice Site Certification The SLRP Practice Site Certification section must be completed by the site representative or authorized representative who agrees to pay the matching award, pay the applicant's prevailing wages, and agrees not to use the Program's award of educational loan repayments as a means to reduce the applicant's salary or offset those salaries during the life of the contract. This section contains the name and address of employment of the applicant's practice site(s) information and the name of the site or sponsoring entity that will enter into a Memorandum of Understanding (MOU) with OSHPD. If the site(s) is not an approved SLRP Certified Eligible Site (CES), the site will need to complete a CES application for each site where the provider is working. The CES application must be approved by OSHPD prior to the submission of the provider's application. If the site has not been approved, your application will be deemed ineligible.								X