



**CHANGING  
Maryland  
for the Better**

**SmartWork Student Loan Repayment Plan**  
Administered by the Department of Budget and Management  
Office of Personnel Services and Benefits

## APPLICATION

Full Name \_\_\_\_\_ Employee Workday Identification # \_\_\_\_\_

Email address \_\_\_\_\_

Work Phone Number \_\_\_\_\_ Cell phone number \_\_\_\_\_

Address \_\_\_\_\_ Apartment No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

### Employment Information

Classification \_\_\_\_\_ Employing Department \_\_\_\_\_

(Office Use Only) This classification is eligible for participation in the *SmartWork Student Loan Repayment Plan*:

Yes     No

### Post-Secondary Education Student Loan Debt Information

Colleges or Universities attended for undergraduate and/or graduate education, location, and dates of attendance.

College/ University/Trade School	Location (City and State)	Dates of Attendance
		/ / to / /
		/ / to / /

Name of Lender: \_\_\_\_\_

**Employee's Loan Debt or Loan Debt on Behalf of Eligible Child:** (Please check one below.)

The outstanding loan for which repayment is sought:

Employee     Eligible Child (Name of Child: \_\_\_\_\_)



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I understand that pursuant to Executive Order 01.01.2018.17, the *SmartWork Student Loan Repayment Plan* is solely intended for employees in classifications identified by the State as eligible for participation due to chronic workforce shortages within the State Personnel Management System or the Transportation Service Human Resource System. The list of qualifying classifications is subject to change at any time. Employees are strongly encouraged to review the comprehensive listing of covered classifications before submitting a completed application.

I understand that the repayment received by me as a result of my participation in the *SmartWork Student Loan Repayment Plan* is intended to reimburse me for payments that I made for qualifying student loans and that I cannot receive more money than I paid to satisfy qualifying student loan debt in the applicable repayment period. I understand and agree that I must submit documentation evidencing that the student loan repayment funds were used for the repayment of the student loan debt described in this application when I make my request for repayment after the close of my repayment interval.

I authorize the educational institutions and the lenders listed in this application, and the Office of Personnel Services and Benefits to disclose to each other any personal, academic, or financial information about me that is necessary to process this Application and award the loan repayment funds. The disclosure of such information is governed by applicable federal and State privacy laws, including the Family Educational Rights and Privacy Act and the Maryland Public Information Act.

I understand that my completed Obligated Service Agreement is incorporated by reference in this Application.

I hereby affirm, under penalty of perjury and upon personal knowledge, that the contents of this application, including the attachments hereto, are true and correct.

***Mail completed Application and Obligated Service Agreement to: Student Loan Repayment Plan,***

***Room 609, 301 W. Preston Street, Baltimore, MD 21201. Thank you.***

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Signature

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Date

**Notary Public:**

State of \_\_\_\_\_, City/County of \_\_\_\_\_, to wit:

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Signature of Notary Public \_\_\_\_\_

Commission Expires: \_\_\_\_\_