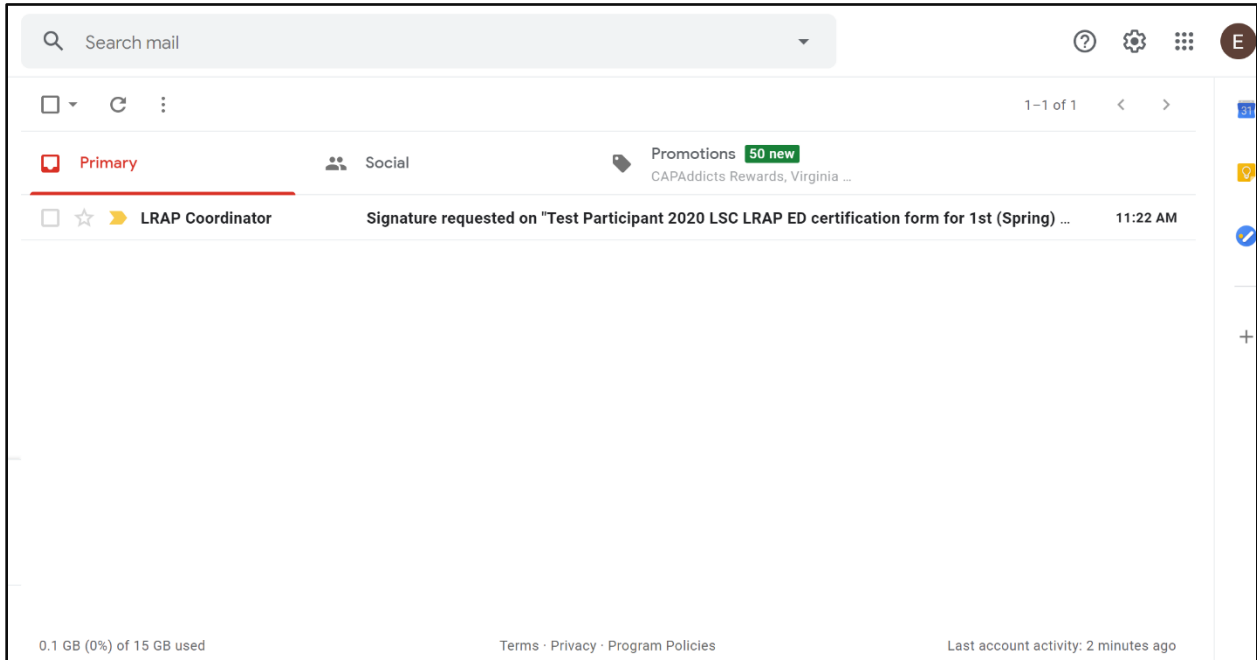
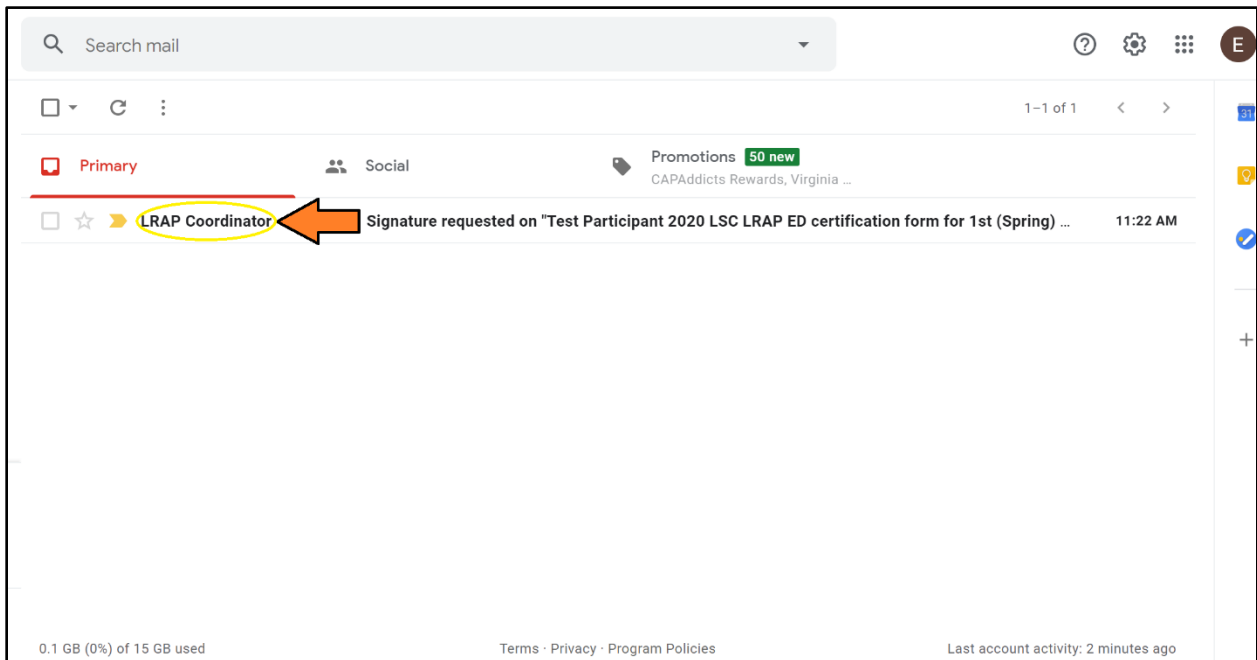


2020 LSC LRAP Executive Director Certification Form e-Sign Instructions

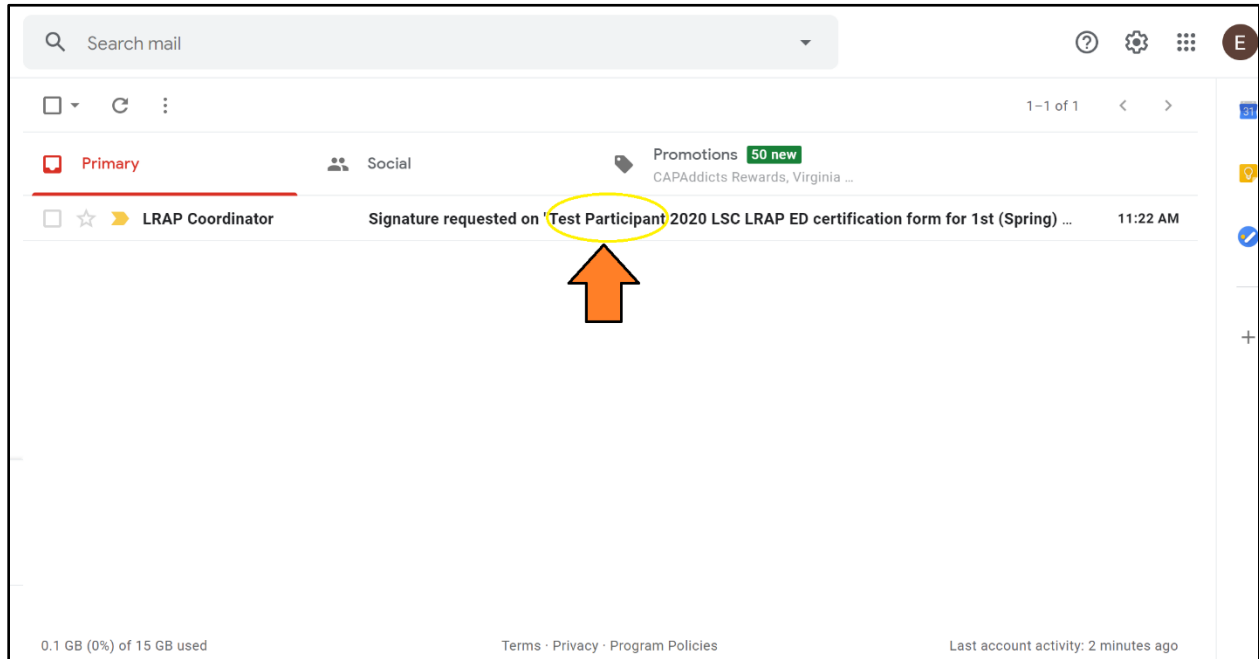
You will receive an email similar to the sample below asking you to sign the Executive Director (ED) certification form.



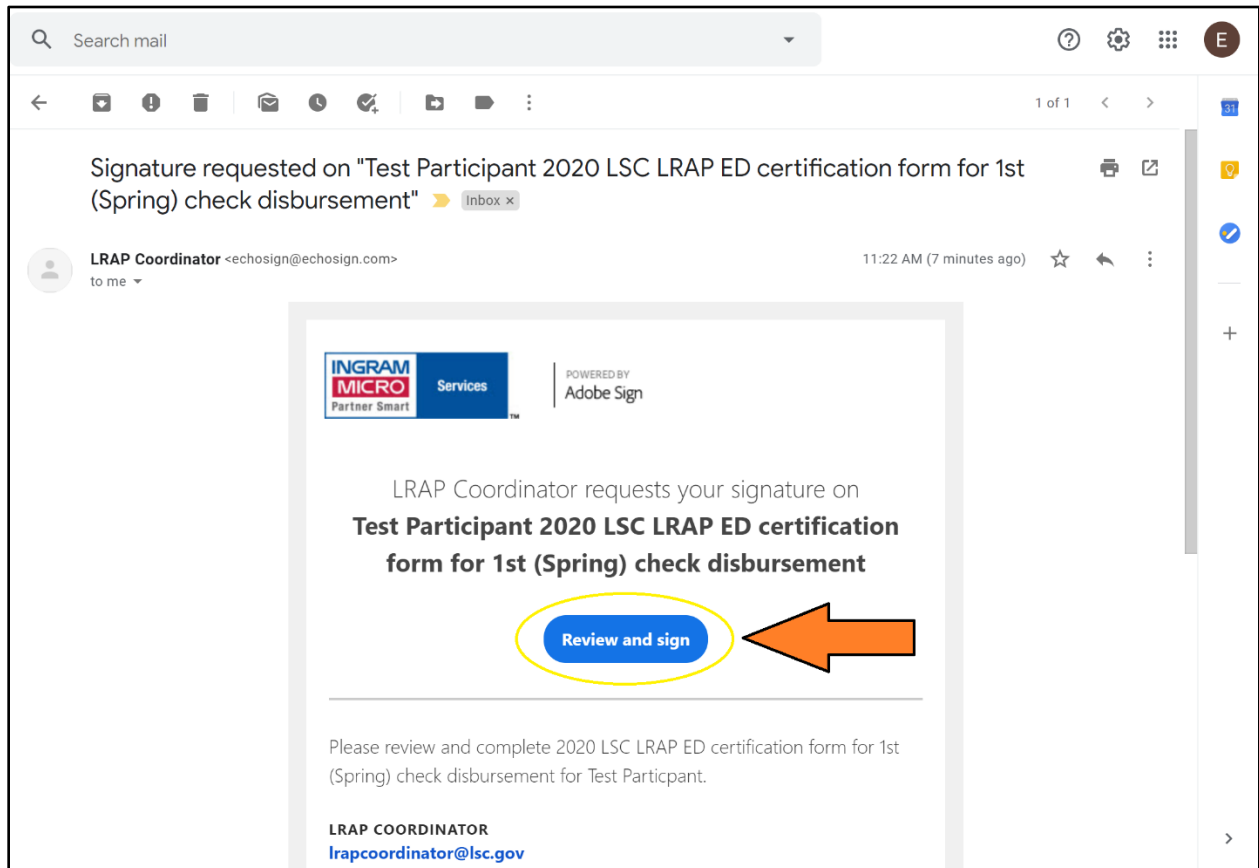
Please note: The email will come from the LRAP Coordinator.



The participating attorney from your program will be named in the subject line of this email.



When you open the email, it will look like the sample below. Click the link to review and sign the document.



You will be required to begin filling out the various fields. Follow the yellow arrows on the left as you tab through the various fields required for you to complete. You can even click on these arrows to move to the next field.

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 6

*Executive Director Certification of
LSC-LRAP Participating Attorney Employment and Good Standing
for the period October 01, 2019 – March 31, 2020*

Instructions:
In order for the first disbursement of the FY 2020 LSC-LRAP loan to be made, 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 2020.

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

Participating Attorney (PA) Name: **Test Participant**
LSC-Grantee (Program) Name: Blue Ridge Legal Services, Inc. - 447081

CHECK ALL APPLICABLE BOXES:

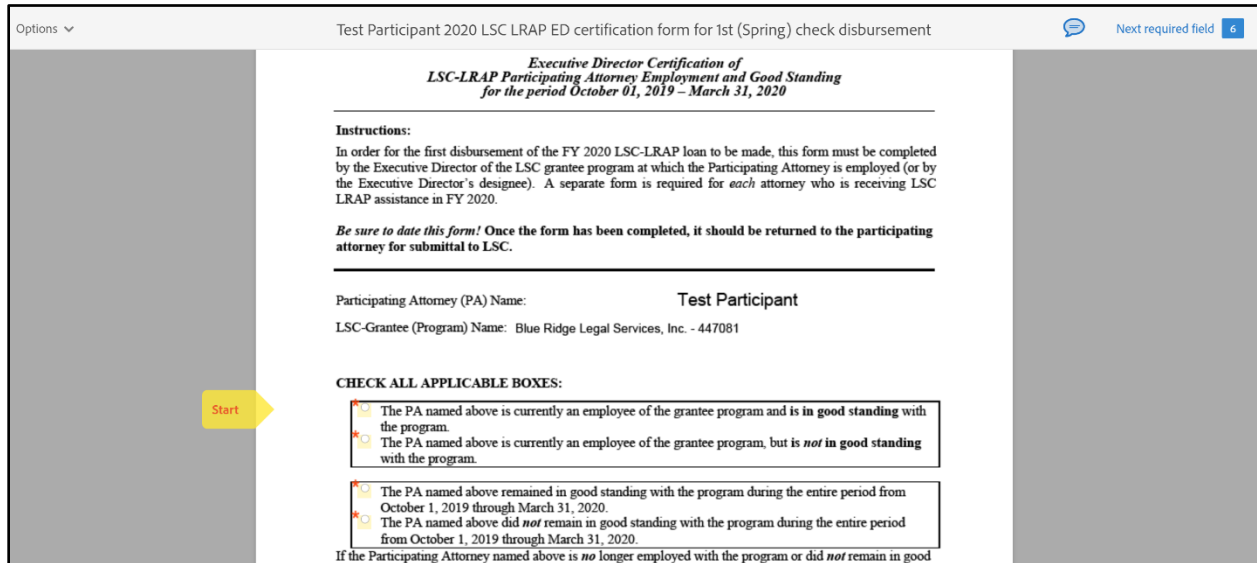
The PA named above is currently an employee of the grantee program and is in **good standing** with the program.

The PA named above is currently an employee of the grantee program, but is **not in good standing** with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

The PA named above did **not** remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

If the Participating Attorney named above is **no** longer employed with the program or did **not** remain in good



The Participating Attorney and LSC Grantee Program fields have been pre-populated with the attorney participant from your program and your program's name.

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 6

*Executive Director Certification of
LSC-LRAP Participating Attorney Employment and Good Standing
for the period October 01, 2019 – March 31, 2020*

Instructions:
In order for the first disbursement of the FY 2020 LSC-LRAP loan to be made, 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 2020.

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

Participating Attorney (PA) Name: **Test Participant**
LSC-Grantee (Program) Name: **Blue Ridge Legal Services, Inc. - 447081**

CHECK ALL APPLICABLE BOXES:

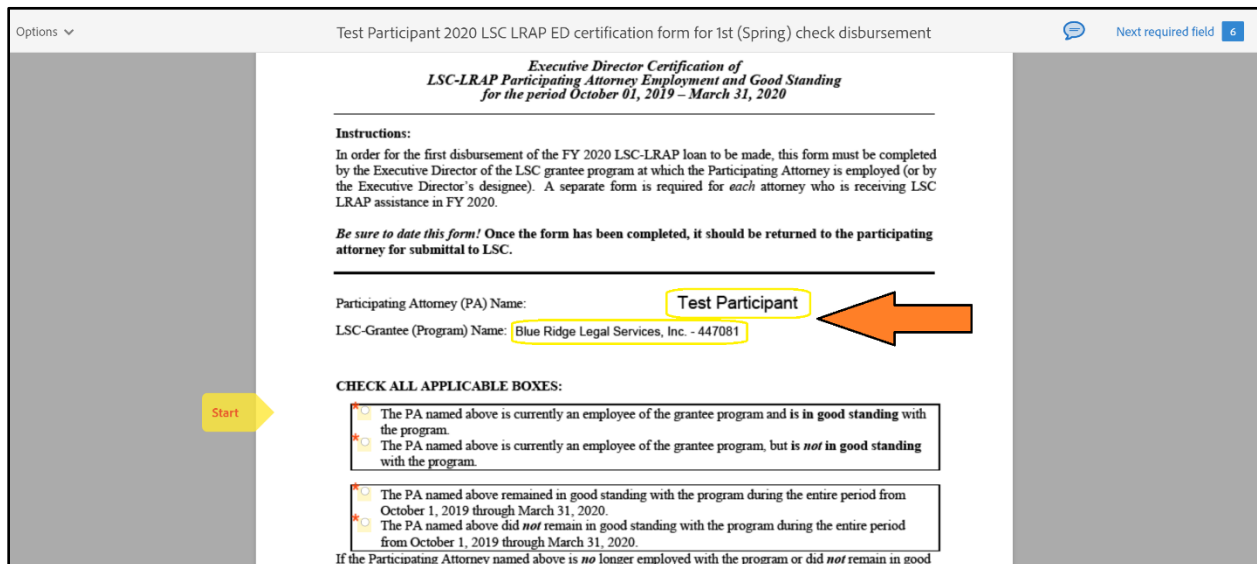
The PA named above is currently an employee of the grantee program and is in **good standing** with the program.

The PA named above is currently an employee of the grantee program, but is **not in good standing** with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

The PA named above did **not** remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

If the Participating Attorney named above is **no** longer employed with the program or did **not** remain in good



There are two sets of certifications you will need to complete. The first speaks to the current state of the participant's relationship with the program and the second speaks to the relationship during the disbursement period in question.

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 6

Instructions:
In order for the first disbursement of the FY 2020 LSC-LRAP loan to be made, 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 2020.

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

Participating Attorney (PA) Name: **Test Participant**
LSC-Grantee (Program) Name: Blue Ridge Legal Services, Inc. - 447081

CHECK ALL APPLICABLE BOXES:

The PA named above is currently an employee of the grantee program and is in **good standing** with the program.

The PA named above is currently an employee of the grantee program, but is **not in good standing** with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

The PA named above did **not** remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

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).

Start →

For each certification, click the button next to the statement that most accurately fits the specified condition. Please make selections for both of these certifications.

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 4

Instructions:
In order for the first disbursement of the FY 2020 LSC-LRAP loan to be made, 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 2020.

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

Participating Attorney (PA) Name: **Test Participant**
LSC-Grantee (Program) Name: Blue Ridge Legal Services, Inc. - 447081

CHECK ALL APPLICABLE BOXES:

The PA named above is currently an employee of the grantee program and is in **good standing** with the program.

The PA named above is currently an employee of the grantee program, but is **not in good standing** with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

The PA named above did **not** remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

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).

Next →

Select one of the two options

In the event the attorney participant is not in good standing or you deem it necessary to provide further details on your certification selections, there are additional selections (optional) and a comment field below the two certification fields for added detail.

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 4

The PA named above is currently an employee of the grantee program and is in good standing with the program.
 The PA named above is currently an employee of the grantee program, but is **not in good standing** with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.
 The PA named above did **not** remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

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:

Select if applicable

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.

* _____ Title
Executive Director or designee (PRINT NAME) *
* Click here to sign * _____
Signature Date

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 4

The PA named above is currently an employee of the grantee program and is in good standing with the program.
 The PA named above is currently an employee of the grantee program, but is **not in good standing** with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.
 The PA named above did **not** remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

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 _____ (date).
 Other, please describe.

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

* _____ Title
Executive Director or designee (PRINT NAME) *
* Click here to sign * _____
Signature Date

Next, at the bottom of the form, you are prompted to provide your personal information. Click on the fields for your printed name, printed title, and the date. Enter the corresponding information for each of those fields accordingly.

The screenshot shows a web form titled "Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement". The form contains several sections of text and radio button options. At the bottom, there are four input fields: "ED's Printed Name", "ED's Printed Title", "Signature", and "Date". The "Date" field contains the text "06/12/2020". An orange arrow on the left points to the "Next" button, and another orange arrow on the right points to the "Date" field.

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 1

with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.
 The PA named above did *not* remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

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.

ED's Printed Name _____ ED's Printed Title _____
Executive Director or designee (PRINT NAME) Title
* Click here to sign _____ 06/12/2020
Signature Date

Next

When you have completed entering your personal information and reviewed the form for accuracy, click on the Signature field to sign the document.

This screenshot is identical to the one above, but with a yellow highlight around the "Click here to sign" text in the Signature field. An orange arrow on the left points to the "Next" button.

Options ▾ Test Participant 2020 LSC LRAP ED certification form for 1st (Spring) check disbursement Next required field 1

with the program.

The PA named above remained in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.
 The PA named above did *not* remain in good standing with the program during the entire period from October 1, 2019 through March 31, 2020.

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:

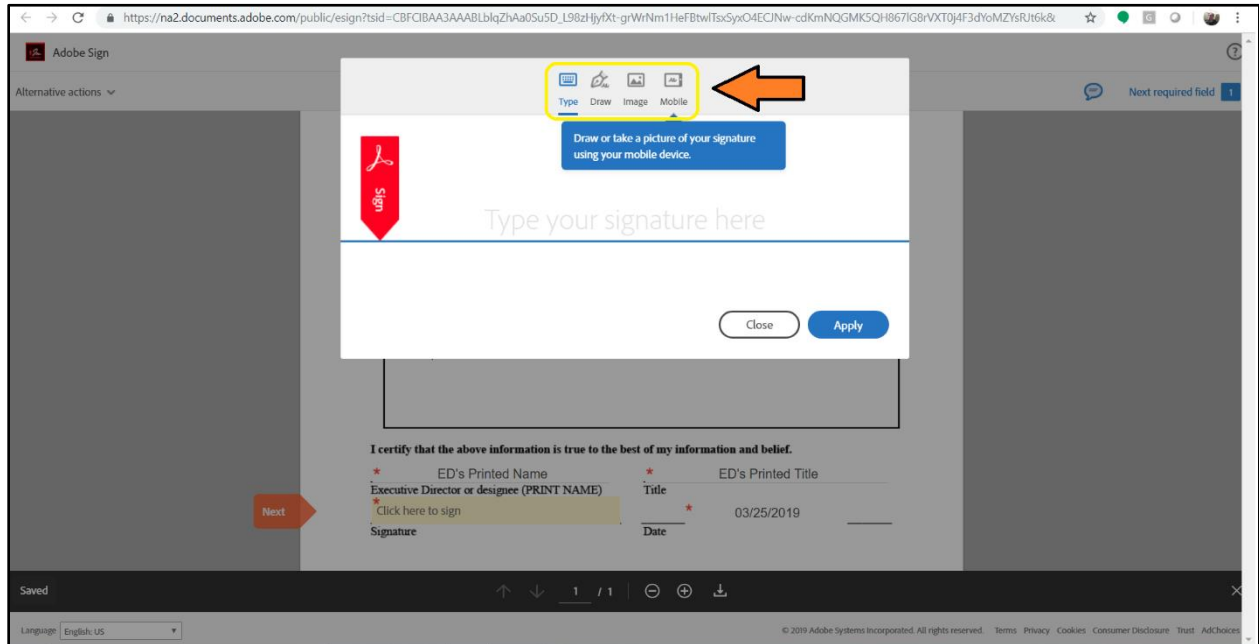
Employee did *not* pass bar examination and left the program, effective _____ (date).
 Employee left program by his/her choice, effective _____ (date).
 Employee left program by program's choice, effective _____ (date).
 Other, please describe.

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

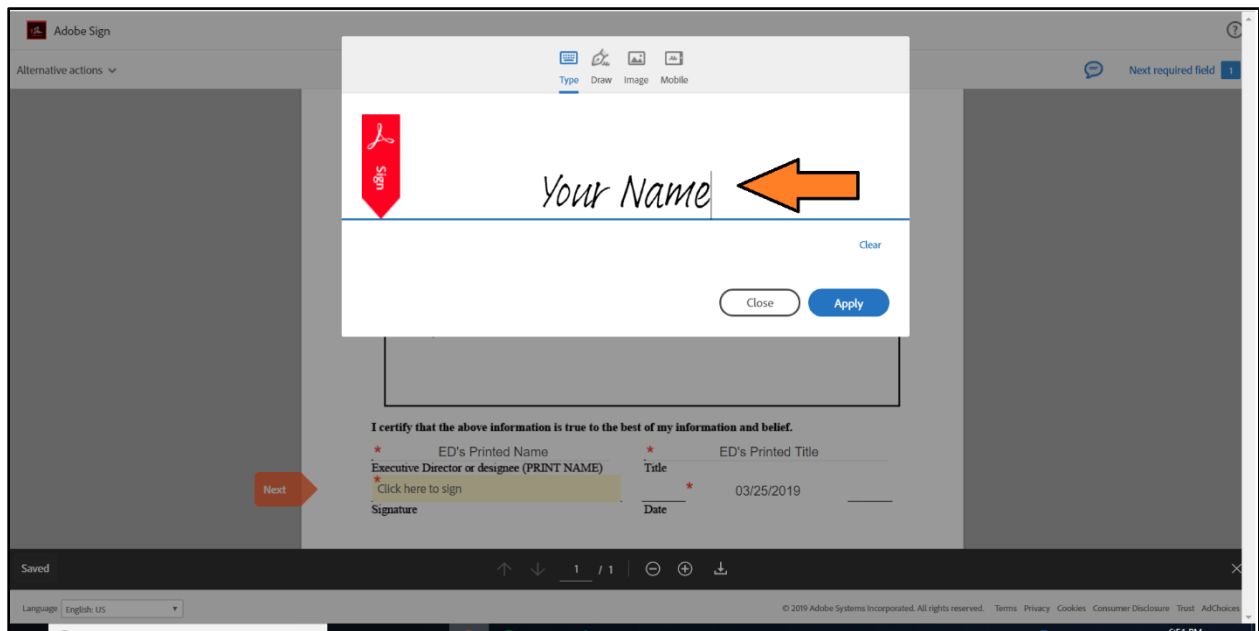
ED's Printed Name _____ ED's Printed Title _____
Executive Director or designee (PRINT NAME) Title
* Click here to sign _____ 06/12/2020
Signature Date

Next

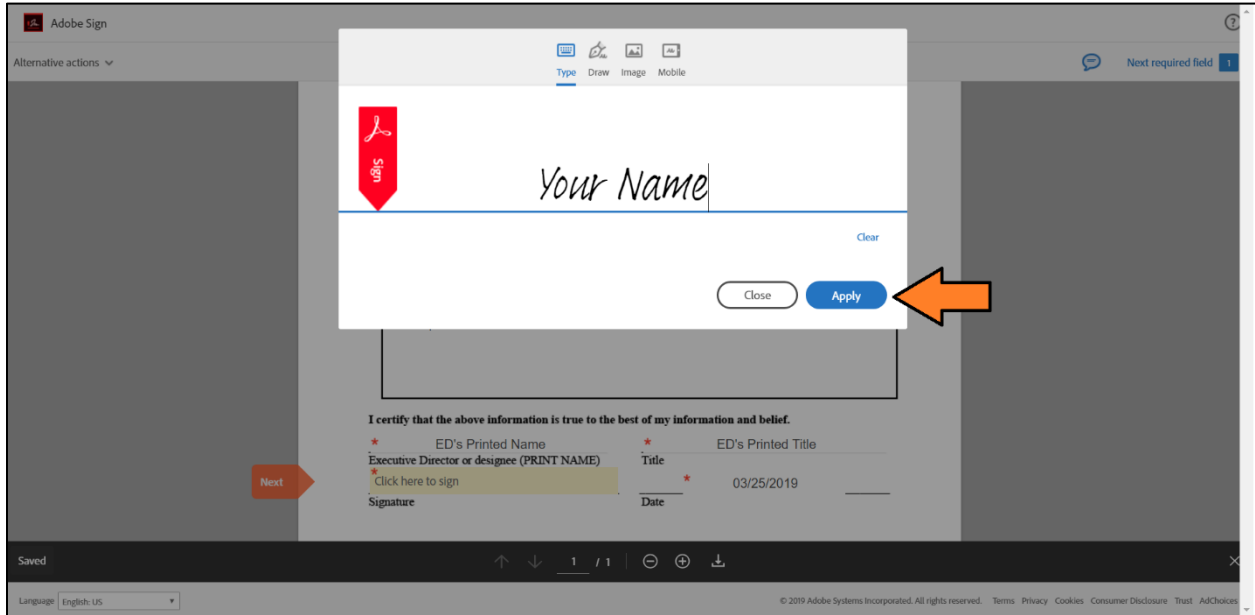
When you click on the signature field, you will be presented with the following:



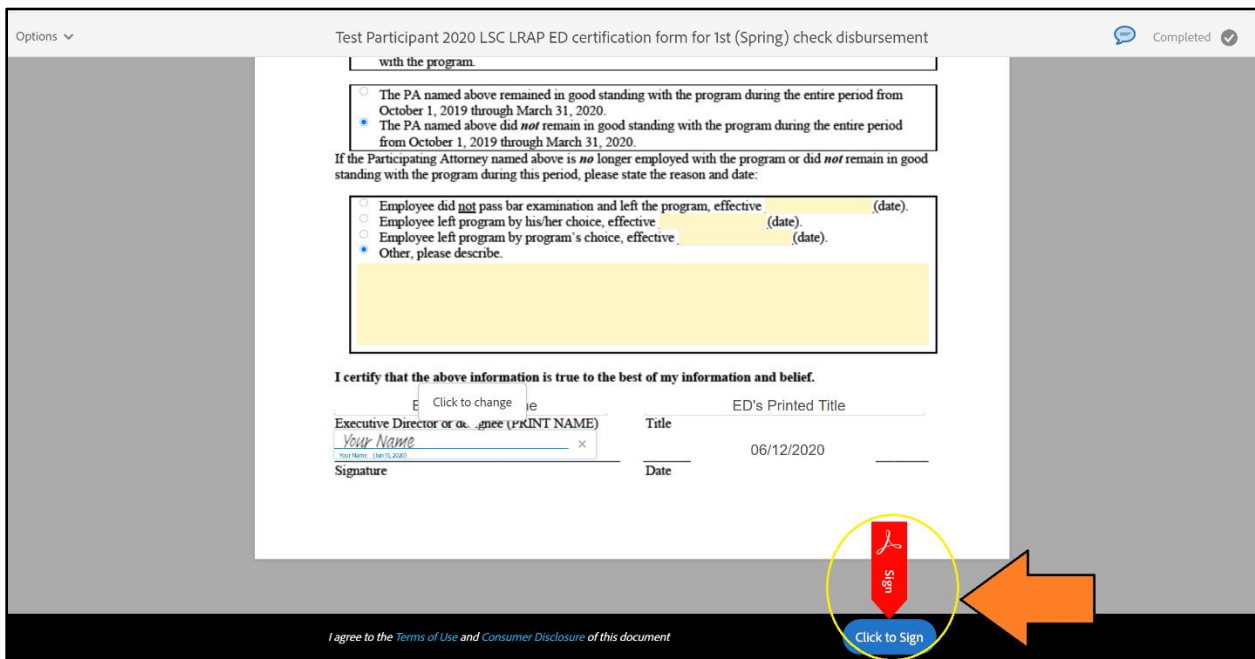
There are multiple options for completing the e-Sign request; TYPE, DRAW, IMAGE and MOBILE. For those not familiar with Adobe e-Sign requests, we recommend the TYPE option, but please feel free to use any of these options. To complete the process with the TYPE option, simply click in the signature field under the TYPE selection and type out your name.



When finished, click the APPLY button in the bottom right.



Once you've applied your signature, you must submit the document by clicking the "Click to Sign" button at the bottom as shown below.



You will then receive a verification that the Executive Director (ED) certification form has been successfully signed and returned to the LRAP Coordinator. We encourage you to use the “Download a copy” option to keep a copy for your records.

