LOW INCOME PROTECTION PLAN

HARVARD LAW SCHOOL, WASSERSTEIN SUITE 5027
CAMBRIDGE, MASSACHUSETTS 02138
TEL: (617) 495-0643
lipp@law.harvard.edu

PARENTAL INFORMATION SHEET

LIPP will cover eligible loan payments, as if the participant were working full-time, for up to six months for a parental leave immediately following the birth of a child.

For part-time work after having children, coverage is the same as if the graduate were working full-time. This policy applies only for parents of children not yet of age to enter ninth grade.

NOTE: In addition to this form, your employer must complete and submit the **Parental and Part-Time Leave Employer Certification Form**.

Name: _____ Class Year: _____

Parental Leave

☐ I intend to take parental leave during the current award period

Date parental leave begins: _____ Date parental leave ends: _____

Anticipated birth date of child: _____

* if your employer is unwilling to provide you a parental leave (paid or unpaid) and you must leave your job, please let us know. During parental leave we provide assistance using your Full - Time Equivalent (FTE) salary.

Part-Time Parental Leave

☐ I intend to work part-time in order to care for my child/children.

Part-time employment begins: _____ Part-time employment ends: _____

Number of hours/week while working full-time: _____

Number of hours/week while working part-time: _____

Dependent Children: (attach separate sheets, if necessary)	Name	Age

Applicant's Signature: _____ Date: _____