



State Loan Repayment Program and Maryland Loan Assistance Repayment Program Application Instructions

How to Apply

Applicants must go to the [Maryland State Loan Repayment Program](#) webpage to download Parts I-VIII of the application. Parts I-VII must be submitted electronically through email to mdh.providerworkforceprograms@maryland.gov. If an applicant is unable to submit an application online, please contact the Office of Workforce Development team for technical assistance at mdh.providerworkforceprograms@maryland.gov or call 410-767-6123.

Application

All entries into the application must be typed. Electronic and typed signatures are acceptable when submitted directly from the signing party.

Application Components:

1. Part I: Candidate Information & Applicant Signature
 - a. To be completed by Candidate – electronically as a PDF fillable form.
 - b. Download the file, save with the following nomenclature: First Name Last Name – Year – Existing File Name (Example: Lawrence Hogan – 2021 - Part I Candidate Information)
 - c. Type your responses, including signature, save, and submit via email with appropriate attachments. Do not print and scan the document for submission.
 - i. The following attachments should be included with the Part I submission and are required for the Part I to be considered complete: Proof of Citizenship
 - ii. Proof of Malpractice Insurance
 - iii. Proof of Medical License

2. Part II: Practice Site Confirmation
 - a. To be completed by the Candidate and Employer – electronically as a PDF fillable form.
 - b. Download the file, save with the following nomenclature: First Name Last Name – Year – Existing File Name (Example: Lawrence Hogan – 2021 - Part II Practice Site Confirmation)
 - c. Type your responses, including signature, save, and submit for completion to your employer.
 - d. Employer should submit via email with appropriate attachments. Do not print and scan the document for submission.

3. Part III: Site Eligibility Application
 - a. To be completed by Employer – electronically as PDF fillable.
 - b. Site contact: Download the file, save with the following nomenclature: Applicant First Name Last Name – Year – Existing File Name (Example: Lawrence Hogan – 2021 - Part III Site Eligibility Application)
 - c. Type your responses, including signature, save, and submit via email with appropriate attachments. Do not print and scan the document for submission.
 - i. The following attachments should be included with the Part III submission and are required for the Part III to be considered complete: Background information about practice site
 - ii. Non-profit certificate for practice site, if applicable
 - iii. Copy of practice site’s brochure or marketing, if available
 - iv. Copy of practice site’s sliding fee scale and sliding fee scale policy
 - v. Copy of public notice of sliding fee scale
 - vi. Copy of applicant’s employment contract with practice site (not applicable for medical residents)
4. Part IV: Lender Verification Forms (to be completed and submitted by each lender)
5. Part V: Official Transcript (to be sent by medical or physician assistant school)
6. Part VI: Cultural Competency Requirements Form
 - a. To be completed by the Candidate and Employer
 - b. Download the file, save with the following nomenclature: First Name Last Name – Year – Existing File Name (Example: Lawrence Hogan – 2021 - Part VI Cultural Competency Requirements Form)
 - c. Read, sign page 1, save, and submit for completion to your employer
 - d. Employer should read, sign page 1, and submit via email
7. Part VII: Retention Study Signature
 - a. To be completed by the Candidate and Employer
 - b. Download the file, save with the following nomenclature: First Name Last Name – Year – Existing File Name (Example: Lawrence Hogan – 2021 - Part VII Retention Study Signature)
 - c. Read, sign page 1, save, and submit for completion to your employer
 - d. Employer should read, sign page 1, and submit via email
 - e.
8. Part VIII: Understanding Breach of Contract (to be read by the Candidate and Employer)

Submission Types

All electronic submissions of parts I-III must be emailed to mdh.providerworkforceprograms@maryland.gov as a PDF fillable document. Please do not

scan and send Parts I-III. All other submissions of parts IV-VII may be scanned and emailed to mdh.providerworkforceprograms@maryland.gov . All parts of the application must be submitted by email.

Application Deadline

The deadline to submit a Maryland State Loan Repayment Program application is April 15, 2021 at 11:59 p.m. Eastern Standard Time. All application parts must be received by the application deadline.

Incomplete Applications

An application is not complete until all parts of the application have been submitted, including attachments. MDH may contact an applicant to request additional information, as needed. If the requested information is not provided, the application will be denied.

Application Review Period

Once an application has been successfully submitted, the applicant will receive a confirmation email. The application will be reviewed by the Office of Workforce Development team and the applicant will be notified of the application decision no later than twelve weeks from application closing date. Applicants will receive updates about the review process at the email address shared in Part I of the application.

Questions and Technical Support

For questions about the application or technical difficulty with the application, please contact the Office of Workforce Development team for technical assistance at mdh.providerworkforceprograms@maryland.gov or call 410-767-6123.