



FRESNO COUNTY LEGAL PROFESSIONALS ASSOCIATION

Raising the Bar in Fresno County Since 1936

SCHOLARSHIP APPLICATION 2015-2016 (First Time Student/Career Change)

- First Time Student
- Career Change

I, _____, affirm my request to be considered for the 2015-2016 Fresno County Legal Professional Association Scholarship Award. I hereby understand that this application will be available to qualified individuals who are seeking financial assistance for their studies. I affirm that I plan to pursue a career in the field of law. Any scholarship funds awarded will be applied to such education.

This application is my own work. I affirm that the information contained herein is true and accurate to the best of my knowledge.

BIOGRAPHICAL QUESTIONNAIRE

A. You, the Nominee

Legal name in full

 (LAST) (FIRST) (M.I)

Permanent Residence

 (STREET AND NUMBER)

 (CITY) (STATE) (ZIP CODE)

 (HOME TELEPHONE) (CELL)

- If selected as a scholar, I wish to receive notification by e-mail

 (E-MAIL)



D. YOUR ASPIRATIONS

1. Describe your career goals and any professional aspirations you wish to achieve.

2. What motivates you to pursue a career in the field of law?

3. Why do you think you deserve to receive this scholarship from Fresno County Legal Professional Association?

4. What additional information (not already addressed in the application) do you wish to share with the Fresno County Legal Professional Association Scholarship Review Committee?
