

HUDSON COUNTY BAR FOUNDATION SCHOLARSHIP APPLICATION

583 Newark Avenue, 4th Floor
Jersey City, NJ 07306
Telephone: 201 798-4708
Fax: 201 798-1740

HCBF Scholarship Application Criteria, Guidelines & Requirements

All scholarship candidates MUST submit a COMPLETE and ACCURATE application and must include ALL required supplemental materials in a submission that must be postmarked no later than April 26, 2019 to be considered. All applications that are untimely or that are not in conformance with the criteria listed below **will not be considered.** All awards are distributed at the discretion of the Hudson County Bar Foundation Scholarship Committee. All Applicants must be enrolled in or admitted to an accredited ABA approved law school at the time of the interview in order to be eligible for a scholarship award. The Hudson County Bar Foundation reserves the right to request additional information from each scholarship Applicant.

All of the following documentation must be submitted in person or in a mailed submission postmarked by April 26, 2019. If you have any questions about this application or this process, please contact the Hudson County Bar Foundation at the telephone number listed at the top of this page.

1. **Scholarship Application:** All relevant sections of the application must be completed by the Applicant. The responses to each portion of the application **MUST** be printed or typed. The application must be signed by the Applicant.
2. **Proof of Hudson County Residency:** The Applicant **MUST** provide proof of Hudson County residency (i.e. driver's license, tax bill, utility bill, etc.)
3. **Official Transcript(s):** The Applicant **MUST** submit his or her latest law school or college official transcript with his or her scholarship application. If you are a first year law student, please send your undergraduate official transcript. You must also submit a transcript of your grades from your first semester in law school if these grades were released before the application deadline.
4. **Personal Statement:** The Applicant **MUST** submit a typed, double spaced Personal Statement with his or her scholarship application. The personal statement shall not exceed two pages in length. Scholarship applications accompanied by a personal statement not in conformance with these guidelines will not be considered. The personal statement shall discuss the following:
 - *Why did you decide to attend Law School?*
 - *Why did you choose the Law School that you are/will be attending?*
 - *What do you see as the role of the lawyer in society?*
 - *What effect will the granting of this Scholarship have on your Law School career?*
 - *School & Community Activities*
 - *Career Goals*
 - *Do you intend to practice in Hudson County?*

5. Financial Aid Confirmation Letter: The Applicant MUST submit with his or her scholarship application a financial aid notice from their school indicating the financial aid amount awarded to the Applicant for the academic year OR a letter from the Applicant's law school indicating that the Applicant is not eligible to receive financial aid.

6. 1040 Tax Form: The Applicant MUST include a copy of his or her Federal 1040 tax form filed in the most recent fiscal year with his or her scholarship application. If the Applicant is married and the Applicant and his or her spouse file separate Federal 1040 tax forms, please provide a copy of Applicant's spouse's most recent Federal 1040 form. If the Applicant did not file a Federal or State income tax return in the most recent fiscal year, explain in writing why no tax return was filed.

7. Letters of Recommendation: The Applicant MUST include two letters of recommendation with his or her scholarship application. The letters should address Applicant's academic achievements, professional skills and any public interest/community service work performed by the Applicant. All letters should be signed, dated and included in sealed envelopes to the HCBF at the above address. Letters from family members will not be considered.

HUDSON COUNTY BAR FOUNDATION SCHOLARSHIP APPLICATION

583 Newark Avenue, 4th Floor
Jersey City, NJ 07306
Telephone: 201 798-4708
Fax: 201 798-1740

Please follow the instructions carefully. This Application and all required supporting documentation must be forwarded to the Hudson County Bar Foundation by hand or be sent by mail bearing a postmark of April 26, 2019 or earlier. All applications that are untimely or that are not in conformance with the criteria listed below will not be considered. All Applicants must be enrolled in or admitted to an accredited ABA approved law school at the time of the interview in order to be eligible to receive a scholarship award. The Hudson County Bar Foundation reserves the right to request additional information from each scholarship Applicant.

Scholarships will be awarded on an objective and non-discriminatory basis with regard to the race, creed, national origin, gender, sexual preference or sexual identity of any applicant.

BASICS

1. Name: _____
2. DOB: _____ Place of Birth: _____ Citizenship: _____
3. Father's full name: _____ Mother's Full Name: _____
4. Last four digits of your Social Security number: _____
5. Is your father living? Yes _____ No _____ Is your mother living? Yes _____ No _____
6. Occupation of Father: _____ Occupation of Mother: _____
7. Applicant's Home Address: _____
8. Home Phone: _____ Cell Phone: _____ E-mail _____
9. Where do you want all HCBF Scholarship notifications sent to? _____

10. Do your parents live in Hudson County? Yes ___ No ___ If so, for how long? _____
11. Do you live in Hudson County? Yes ___ No ___ If so, for how long? _____

12. Are you related to or are you a friend of any of the HCBF Committee Members: Yes__ No __
(Please see the attached list of HCBF Committee Members)
13. If so, please list his or her name and nature of the relationship: _____

14. Do you currently work, intern or volunteer for any of the HCBF Committee Members: Yes__ No__
15. If so, please list his or her name, the nature of the relationship, and the duration of the relationship: _____

16. Have you ever worked, interned or volunteered for any of the HCBF Committee Members:
Yes__ No __
17. If so, please list his or her name, the nature of the relationship, and the duration of the relationship: _____

EDUCATION

18. UNDERGRADUATE SCHOOL
19. Undergraduate School and Location: _____
20. Undergraduate Graduation Date and Degree awarded: _____

21. Undergraduate Major: _____ Undergraduate Minor: _____
22. Overall Undergraduate GPA: _____ Class Rank: _____
23. Academic achievements, honors, and awards; civic, and community contributions; and extracurricular activities: _____

GRADUATE SCHOOL

24. Graduate School and Location (*if applicable*): _____
25. Graduation Date and Degree: _____
26. Graduate Major: _____ Overall GPA: _____
27. Academic achievements, honors, and awards; civic and community service; and extracurricular activities: _____

LAW SCHOOL

28. Name and location of Law School you will be/are attending: _____

29. Anticipated Month and Year of Graduation: _____

30. School Address _____
31. LSAT Score: _____
32. Semester & Year you will be Entering: Fall () Spring () Other () _____
33. Current GPA: _____
34. Academic achievements, honors, awards, civic or community contributions or extracurricular activities:

LAW SCHOOL FUNDING

35. List all anticipated law school costs (including, but not limited to, tuition, room and board, books, etc.).

36. Source of funding (including, but not limited to, loans, financial aid, other scholarships, employment, gifts or loans from parents, other). Please distinguish between funds already received and anticipated funds. _____

37. Please list any other scholarship funds (source, amount and year) you will receive or have received for law school: _____

38. Please list any other scholarships (source, amount and date) for which you have applied: _____

39. Please list any extenuating circumstances, if any, which you think make your financial situation unique: _____

BUDGET FOR UPCOMING SCHOOL YEAR:

40. Anticipated Income (List amount and source): _____

41. Anticipated Expenses: _____

NET WORTH STATEMENT

42. **Assets:** (List all assets including, but not limited to, bank accounts, securities, real estate, and trusts of which you are the beneficiary): _____

43. Total Assets: \$ _____

LIABILITIES: (Loans and Assorted Debt)

44. Total Liabilities: \$ _____

Certification Page

- I am a bona fide resident of Hudson County.
- I **MUST** attend the Scholarship Interviews which are scheduled to take place on or about May 23, 2019 at 3:00 pm.
- If a scholarship is awarded to me, it is awarded conditioned upon my attending the scholarship awards ceremony unless excused by the committee. Said ceremony is to take place on or about June 20, 2019 at 6:00 pm.
- I understand that any scholarship award is further conditioned upon the truth and veracity of the statements contained in this Application and supporting documentation.

In consideration of my academic record and the facts set forth in this application, I respectfully petition that the scholarship be awarded to me for the academic year 2019 – 2020. I solemnly affirm to the best of my knowledge the information that I have provided in this application is true and accurate.

Signature: _____ Date: _____