2016-2017 LAW SCHOOL SCHOLARSHIP PROGRAM APPLICATION

Since MALDEF’s founding, the civil rights organization has furthered its mission to advance Latino civil rights by awarding scholarships to law students who similarly seek to advance Latino civil rights through their careers.

MALDEF’s 2016-2017 Law School Scholarship is open to all students who are enrolled at an accredited United States law school in the 2016-2017 academic school year. Applicants are evaluated based on four main factors: 1) personal background and financial need; 2) academic and extracurricular achievement; 3) demonstrated commitment to serving the Latino community, shown through academic, extracurricular, or professional record of service; and 4) future plans to advance the rights of Latinos.

A COMPLETE APPLICATION REQUIRES THE FOLLOWING ITEMS:

1. MALDEF Law School Scholarship Application Form, including the Financial Statement Form completed by the applicant’s law school.

2. Current Resume.

3. Personal Statement up to 750 words, double-spaced. We invite you to submit a personal statement on a topic of your choosing that you feel will best convey your strengths in the four main evaluative factors listed above. Please include your short- and long-term professional aspirations following law school.

4. One (1) Letter of Recommendation.

5. Transcripts for law school (for applicants who have completed at least one semester of law school) and college (for applicants who are applying to or just enrolled in law school). Unofficial transcripts accepted.

PLEASE DELIVER APPLICATION MATERIALS TOGETHER ELECTRONICALLY TO:

lawscholarships@maldef.org

OR, BY MAIL TO:

MALDEF Law School Scholarship Program
Attn: Jonhatan Aragon
634 S. Spring St., 11th Floor
Los Angeles, CA 90014

APPLICATIONS MUST BE EMAILED OR POSTMARKED BY TUESDAY, JANUARY 17, 2017.
Instructions: Please answer each question completely and accurately. If a question is not applicable, please indicate this by writing “N/A.” Where necessary, use additional pages to complete your answers.

1. APPLICANT’S CONTACT INFORMATION.

Last Name    First Name    Middle

Address for Scholarship Notification  City  State  Zip Code

Email Address    Telephone

2. EDUCATION.

Law School: __________________________________________________

Expected Date of Graduation: _______________________________________

Undergraduate School(s): ____________________________________________

Degree(s): _______________________________________________________

Year of Graduation(s): _____________________________________________

Other Graduate School(s): __________________________________________

Degree(s): _______________________________________________________

Year of Graduation(s): _____________________________________________

3. BACKGROUND INCOME INFORMATION.

Have you previously received a MALDEF Law School Scholarship? ____________________________

Your most recent occupation / annual income prior to law school: ____________________________

Mother’s occupation / annual income: _____________________________________________________

Father’s occupation / annual income: _____________________________________________________

Dependents: __________________________________________________________________________
4. **ASSETS.** Include all assets you (combined with your spouse or domestic partner) currently hold:

Estimated savings / investments / other assets: ______________________________________

Real estate (fair market value minus mortgage): ______________________________________

5. **DEBT.** List all of your (combined with your spouse or domestic partner) outstanding debts:

<table>
<thead>
<tr>
<th>PURPOSE</th>
<th>LENDER NAME</th>
<th>GOV’T OR PRIVATE</th>
<th>AMOUNT OF DEBT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL: $____________________

6. **OTHER.** Please discuss any additional financial facts or circumstances that you believe might be useful in our evaluation of your application.

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________
7. CONFIDENTIALITY.

MALDEF respects the privacy of all Applicants and will treat all information contained in and submitted along with this MALDEF Law School Scholarship Application Form as confidential, except as may be required to evaluate and verify information contained in an application. However, in the event you are selected to receive a MALDEF Law School Scholarship, MALDEF may utilize general information about your background and a photo, provided by you, to publicize your receipt of a scholarship and/or the MALDEF Law School Scholarship Program generally. Please note that MALDEF will never inquire into or disclose information about the residency status of any of our applicants. By signing below, you are indicating your agreement with these terms, including your waiver of confidentiality as described here should you be selected as a scholarship recipient.

I understand and agree to the terms of this provision, including waiver of confidentiality as described here should I be selected to receive the MALDEF Law School Scholarship, and grant free permission to MALDEF to utilize general information about my background and a photo to publicize my receipt of a scholarship and/or the MALDEF Law School Scholarship Program generally.

____________________________________________________________________________
Signature of Applicant     Date

8. CERTIFICATION.

I certify that, to the best of my knowledge and belief, the information contained in my application and all documents submitted along with my application are true and accurate representations of my background and candidacy for this scholarship.

____________________________________________________________________________
Signature of Applicant     Date
LAW SCHOOL SCHOLARSHIP
FINANCIAL STATEMENT FORM

(To be completed by the applicant’s Law School Financial Aid Office)

STUDENT’S NAME: _____________________________________________________

STUDENT’S EXPECTED GRADUATION DATE: ______________________________

STUDENT BUDGET FOR THE CURRENT SCHOOL YEAR: _____________________

TOTAL LAW SCHOOL SCHOLARSHIP/GRANTS OFFERED: ___________________

TOTAL LOANS OFFERED: _______________________________________________

STUDENT’S UNMET FINANCIAL NEED: ____________________________________

______________________________________________________________________

Law School Financial Aid Officer’s Signature  Printed Name

______________________________________________________________________

Law School Financial Aid Officer’s Title   Name of Law School

Please return to Applicant for submission or send directly to:

lawscholarships@maldef.org

or, by mail to:

MALDEF Law School Scholarship Program
Attn: Jonhatan Aragon
634 S. Spring St., 11th Floor
Los Angeles, CA  90014

MUST BE EMAILED OR POSTMARKED BY
TUESDAY, JANUARY 17, 2017