

BUTTE COUNTY BAR ASSOCIATION SCHOLARSHIP

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness ensure your application will be reviewed properly.

APPLICANT Last Name _____ First _____ Middle Initial _____

DATA Mailing Address _____

City _____ State _____ Zip Code _____

Telephone (_____) _____ Cell Phone (_____) _____

Email Address _____

Please indicate your status. (For statistical purposes only) Male Female

African American/Black

Asian American/Pacific Islander

Hispanic/Latino

Native American/American Indian

White

Sending a resume does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. Your name, address and name of this scholarship should be on all attachments.

WORK EXPERIENCE Describe your paid work experience during the past four years (e.g., office work, professional work). Indicate dates of employment for each job and approximate number of hours worked each week.

Name of Employer	Position Held	From-Mo/Yr	To-Mo/Yr	Hour per week

COMMUNITY SERVICE ACTIVITIES List community service activities in which you have participated.

Activity	From-Mo/Yr	To-Mo/Yr	Offices Held or Description of Participation

ESSAY Submit a personal statement of not more than one page on how you intend to use your law degree to contribute to the Butte County community at large.

TRANSCRIPTS Submit most recent academic transcripts.

OPTIONAL FINANCIAL INFORMATION One of the factors that may be considered, but is not required, is financial need. If you would like to be considered on the basis of financial need, please complete the following optional questions. If you do not wish to be considered on the basis of financial need, you may leave these questions blank. Please note that financial need is only one of many factors considered and is not a necessary requirement for receipt of this scholarship.

Are you currently receiving financial aid? If yes, please describe: _____

Please describe your financial circumstances and need for this scholarship: _____

Amount of Scholarship - \$2,000

All materials, including transcript, must be addressed to:

Butte County Bar Association Scholarship
c/o Cal Northern Scholarship Committee
1395 Ridgewood Drive, Ste. 100
Chico, CA 95973

Deadline - May 15th

CERTIFICATION

Cal Northern's Scholarship Committee has the sole responsibility for selecting a recipient based on criteria set forth in the scholarship guidelines.

I acknowledge decisions are final. I certify I meet eligibility requirements of the scholarship as described in the guidelines and the information provided is complete and accurate to the best of my knowledge.

Applicant's Signature _____

Date _____

