



La Raza Lawyers
Charitable Foundation
Santa Clara County

SANTA CLARA LA RAZA LAWYERS SCHOLARSHIP APPLICATION

LA RAZA LAWYERS CHARITABLE FOUNDATION
OF SANTA CLARA COUNTY

GRANT APPLICATION FORM

This is the Application for the academic year beginning FALL of 2009 and ending SPRING 2010. Award will be given at the annual scholarship dinner on October 23rd, 2009 in San Jose.

2009 APPLICATIONS ARE BELOW FOR REFERENCE. YOU MAY CUT AND PASTE THE APPLICATION FOR YOUR USE. AWARDS ARE GIVEN EACH YEAR AT THE ANNUAL SCHOLARSHIP DINNER ON OCTOBER 23, 2009. You must be present at the Scholarship Dinner to be eligible for your award.

DEADLINE FOR 2009 IS **SEPTEMBER 25, 2009**, AND MUST BE POSTMARKED OR TRANSMITTED ELECTRONICALLY BY THAT DATE.

Two or three scholarship grants in the amount of at least \$2,500 are available from the Santa Clara County La Raza Lawyers Charitable Foundation, including the Annual Andrew Gonzales Scholarship for Leadership to honor our Scholarship Founder, and the Annual Daniel V. Hernandez Award for Community Service, in honor of one of our founding members and San Jose Activist. More scholarships may be awarded as funds are available.

ELIGIBILITY: You must be a **PRESENTLY** enrolled law student (1st, 2nd, 3rd, or 4th).

TERMS: The scholarship grants can be used to assist with living expenses, tuition, books, bar exam courses expenses or anything else you may need to further your legal education.

TO BE ELIGIBLE TO APPLY (CRITERIA):

The La Raza Lawyers Charitable Foundation, working in conjunction with the La Raza Lawyers Association of Santa Clara County, provides these grants to encourage and advance the social, cultural, economic and legal equality of the underserved and underprivileged, especially those in the Latino community. The scholarship grants are available to students who (1) are from the Bay Area (The Foundation will decide on a case by case basis if the student meets this criteria); -OR- (2) attend Santa Clara University, Lincoln Law School, UC Berkeley, the Monterey College of Law, the University of San Francisco, UC Hastings, Stanford, Golden Gate University, UC Davis, or McGeorge Schools of Law. The Foundation will also consider activities such as, but not limited

to, community involvement, peer counseling, school activities and financial need.

EASY TO APPLY:

1. You may cut and paste an application below; and
2. Return the completed application postmarked by the date listed above to the address listed in the application:

LRLA SCHOLARSHIP CHAIR
PO Box 30
San Jose, CA 95103

Or Email to
larazafoundation@comcast.net

PERSONAL INFORMATION

(Please type or print clearly--you may include a resume, but must fill out this application).

Name:

Permanent Address:

Mailing Address:

Home telephone: Work telephone:

Employer:

May we contact your employer? Yes_____ No_____

SELECTION CRITERIA INFORMATION

How did you hear about the grant?

What year are you in law school?

Tell us about how and why you decided to practice law?

What community activities have you participated in to advance the social, economic and legal equality for Latinos or other communities of color?

What community activities do you plan to pursue to advance the social, economic and legal equality of Latinos and other communities of color?

(Please attach a resume to your application)

ACADEMIC INFORMATION

Name of law school you attend:

*Attach or send a PROOF of enrollment.

Enrollment Status:

Full Time _____ Part Time _____

Day Student _____ Night Student _____

Expected completion date: _____
Month Year

List all high schools, colleges, universities and institutions attended since high school. Include dates of attendance, graduation and any degree received.

SCHOOL DATES ATTENDED GRADUATION DEGREE

List any special financial circumstances.
(Attach additional sheet, if needed.)

ACADEMIC INFORMATION

Estimated amount of annual tuition: \$ _____

Estimated amount of annual cost of books and materials: \$ _____

Other education related expenses. Be specific:

Total: \$ _____

Please list two or more references who are not related to you. (Include name, address and telephone number):

You MAY attach up to two letters of recommendation from non-relatives. The Letters of recommendations may also be mailed separately but must also be postmarked by the due date to be considered.

FINANCIAL INFORMATION

Do you plan to live with your parents or relatives during the upcoming school year?
____ Yes ____ No

Do you support, either fully or in part, anyone other than yourself? If yes, give the following information about each person you support:

NAME ADDRESS AGE RELATIONSHIP

INCOME: List your monthly income (including any income of your spouse, or dependent relative living in the household with you, and any parent contributing to your support).

If any person contributes to your support, list those persons, income and expenses under Parent/Other.

Your Own Parent/Spouse/Other

1. Wages _____

FINANCIAL INFORMATION

5. Other benefits

6. Other income

Total Monthly Income _____

If you have been offered summer employment which is not listed as income above please list where you will be working and the amount of income you expect to receive:

Employer Income

Expenses: List the usual monthly expenses of you and the person whose income is listed anywhere above if any.

MONTHLY PAYMENTS YOUR OWN PARENT/SPOUSE/OTHER

10. Other Loans or Debts being paid by monthly installments:

Creditor Amount Monthly Payment

TOTAL MONTHLY EXPENSES

\$ _____

OTHER ASSETS:

Do you or your spouse own real estate. _____

If yes, specify and give current market value. If mortgage, show balance

List the amount of assets you have _____

Bank Account Balance _____

Current value of stocks or bonds _____

Other personal property valued at more than \$1,000 or trust funds _____

TOTAL ASSETS: \$ _____

FINANCIAL INFORMATION

Remarks (use separate sheet if necessary to clarify above information).

List all other grants or financial aid that you currently receive:

I know that anyone who makes or causes to be made a false statement or representation of any material fact in an application or for use in determining eligibility will be disqualified and required to repay any monies received. I affirm that all information in this document and any attachments is true.

SIGNATURE OF APPLICANT:

_____ DATE: _____

** Completed applications and letters of recommendation must be postmarked by the due date above.

TO BE CONSIDERED, AN APPLICANT MUST HAVE SUBMITTED THE FOLLOWING DOCUMENTS:

1. A COMPLETED APPLICATION SIGNED AND DATED BY THE APPLICANT;
2. A VERIFICATION OF ENROLLMENT FROM APPLICANT'S LAW SCHOOL; AND
3. LETTERS OF RECOMMENDATION (OPTIONAL).

THE LA RAZA LAWYERS ASSOCIATION OF SANTA CLARA COUNTY AND THE LA RAZA LAWYERS CHARITABLE FOUNDATION OF SANTA CLARA COUNTY RESERVE THE RIGHT TO CHANGE THE CRITERIA FOR AWARDING THESE SCHOLARSHIPS WITHOUT NOTICE. APPLICANTS WILL BE NOTIFIED ONLY IF THEY ARE AWARDED A SCHOLARSHIP. RECIPIENTS OF THE SCHOLARSHIP AGREE TO ATTEND LA RAZA LAWYER'S ANNUAL SCHOLARSHIP DINNER TO RECEIVE THEIR SCHOLARSHIP, WHICH IS USUALLY HELD IN THE FALL.

THE PERSONAL INFORMATION SUPPLIED BY APPLICANTS WILL BE USED BY LA RAZA LAWYERS OF SANTA CLARA COUNTY SOLELY FOR PURPOSES RELATED TO THE SCHOLARSHIP. THE APPLICANT AGREES THAT ONCE AN APPLICATION IS SUBMITTED THE COMPLETED APPLICATION IS OWNED AND IS THE PROPERTY OF LA RAZA LAWYERS OF SANTA CLARA COUNTY AND THE LA RAZA LAWYERS CHARITABLE FOUNDATION OF SANTA CLARA COUNTY AND WILL NOT BE RETURNED TO THE APPLICANT.