

**LOYOLA UNIVERSITY CHICAGO  
SCHOOL OF LAW  
CHILDLAW FELLOWSHIP APPLICATION**

**Instructions: Please type or print in ink.** If you wish to be considered for the ChildLaw Fellowship, please complete and mail this form and all supporting materials to: *Loyola University Chicago School of Law, ChildLaw Center, Attention: Catherine Columbus, 25 East Pearson 11<sup>th</sup> Floor, Chicago IL 60611.*

**Deadline for submitting all documents: MARCH 1<sup>st</sup>**

**Personal Data**

Name (in full) \_\_\_\_\_

Social Security Number \_\_\_\_\_ Email Address: \_\_\_\_\_

Present Address \_\_\_\_\_ Final Date for Receiving Mail \_\_\_\_\_

Day Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Permanent Address \_\_\_\_\_

Permanent Phone \_\_\_\_\_

*Please contact the ChildLaw Center immediately regarding any address/phone changes.*

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

May we contact you at work? \_\_\_\_\_

Are you applying for a dual degree program in Social Work (MSW)? \_\_\_\_\_

Are you a Teach for America Alumnus/Alumna? \_\_\_\_\_

What is the source of your information about the ChildLaw Fellowship? \_\_\_\_\_

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**Educational Information**

Please list undergraduate degree granting institution \_\_\_\_\_

\_\_\_\_\_ Final G.P.A. \_\_\_\_\_ LSAT Score: \_\_\_\_\_

Honors received \_\_\_\_\_

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Please list all graduate/professional institutions attended \_\_\_\_\_

\_\_\_\_\_ Final G.P.A. \_\_\_\_\_

**Essay**

On a separate piece of paper, please respond to the following question using no more than two double-spaced typed pages: What personal or work experience(s) do you feel have contributed to your interest in becoming a ChildLaw Fellow?

## Work Experience

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Job/Agency	Your Position	Hrs/Week	Dates
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Significant Achievement

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Job/Agency	Your Position	Hrs/Week	Dates
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Significant Achievement

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Job/Agency	Your Position	Hrs/Week	Dates
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Significant Achievement

## Activities/Volunteer Work/Other

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Job/Agency	Your Position	Hrs/Week	Dates
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Significant Achievement

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Job/Agency	Your Position	Hrs/Week	Dates
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Significant Achievement

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Job/Agency	Your Position	Hrs/Week	Dates
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Significant Achievement

## Recommendations

Fellowship applicants must submit **one letter** of recommendation directly to the ChildLaw Center. Please indicate below the name of the person who is writing a letter on your behalf:

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Name	Title	Institution/Company
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*I hereby apply for a ChildLaw Fellowship from Loyola University Chicago School of Law. I certify that all the information contained in my application is accurate and complete. I understand that it is my responsibility to update the law school on any changes to this application.*

*I understand by applying for the fellowship, I give permission to the selection committee to have access to my entire law school application for admission.*

*I understand that this application will only be considered upon my acceptance to Loyola University Chicago School of Law as an entering full-time student. I understand that the fellowship is awarded for one year, but is renewable annually based on satisfactory academic performance and full participation in program activities and internships.*

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Signature	Date
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