

**WOMEN'S BAR FOUNDATION
PUBLIC SERVICE STIPEND AWARD APPLICATION**

Your provision of the information requested in this application is voluntary. We will make copies of this application for the WBF Board Members — so please print neatly and darkly and write only on front side. Please confine your answers to the space provided.

Applications for the Public Service Stipend Award must be received **no later than May 30, 2008** at the following address:

**Carol A. Hogan, Esq.
Scholarship and Stipend Award Director
Women's Bar Foundation
c/o Jones Day
77 West Wacker Drive, Suite 3500
Chicago, Illinois 60601-1692.**

1. GENERAL INFORMATION

NAME: _____

DATE OF APPLICATION: _____, 20__.

LOCAL ADDRESS: _____

CITY, STATE, ZIP: _____

LOCAL PHONE NUMBER: () _____

HOME STATE AND COUNTY*: _____

*County you are from (i.e., the county where you were raised or resided before attending law school).

STATE AND COUNTY WHERE YOU PLAN TO RESIDE/WORK AFTER GRADUATION:

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**2. EXPLAIN WHY YOU ARE QUALIFIED FOR THE WBF PUBLIC SERVICE STIPEND AWARD, ADDRESSING
THE FOLLOWING CRITERIA:**

- A third year female law student or recent female law school graduate;
- Prospective or current employment in the NOT-FOR PROFIT or PUBLIC SECTORS;
- Strong academic record;
- Present and past extracurricular activities reflecting community involvement or participation in activities within and outside of law school that show a commitment to public service or public interest law;
- Demonstrated financial need;
- Involvement with diversity initiatives within law school or the legal community (please provide specific examples); and
- Personal qualities that suggest a future leadership role in the legal community.

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3. YOUR CAREER PLANS AND, IF APPLICABLE, YOUR CURRENT NOT-FOR-PROFIT OR PUBLIC SERVICE EMPLOYMENT:

(Discuss current position and professional objectives, including areas of practice and geographic preferences)

4. LEGAL EDUCATION

NAME OF LAW SCHOOL: _____

CLASS RANK : _____ OVERALL GPA: _____

DATE OF GRADUATION: _____

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**5. YOUR LAW SCHOOL EXTRACURRICULAR ACTIVITIES
(Provide position held and date of involvement):**

**6. YOUR LAW SCHOOL HONORS OR AWARDS
(List dates, organizations presenting awards, amounts of any financial awards):**

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7. YOUR NON-LAW SCHOOL COMMUNITY ACTIVITIES

(List position held and dates of involvement):

8. YOUR NON-LAW SCHOOL COMMUNITY HONORS OR AWARDS

(List dates, organizations presenting awards, amounts of any financial awards, etc.):

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9. FINANCIAL INFORMATION

Income

Category	Current Year (2007-2008)	Next Year (2008-2009)
	\$	\$
Current employment, if applicable	\$	\$
Spousal Assistance/Income NOTE: If you list spousal debts below, you must list separate spousal income here:	\$	\$
	\$	\$
Total	\$	\$

Existing Law Student Debt

Category	Current Year (2007-2008)	Next Year (2008-2009)
	\$	\$
Your total existing law school student debt	\$	\$
Your total existing other student debt	\$	\$
Your spouse's existing student debt	\$	\$
	\$	\$
Total	\$	\$

Other Existing Debt

Category	Current Year (2007-2008)	Next Year (2008-2009)
House mortgage (per month)	\$	\$
Rent (per month)	\$	\$
Car debt(per month)	\$	\$
Spouse's car debt (per month)	\$	\$
Credit card (total debt)	\$	\$
Other: extraordinary expenses,(e.g., extreme medical)	\$	\$
Total Other Debts (Please specify)	\$	\$
	\$	\$
Total	\$	\$

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Use this space, if necessary, to explain any of the Financial Information supplied above:

10. ARE YOU THE FIRST PERSON IN YOUR FAMILY TO ATTEND LAW SCHOOL? (Circle One) YES NO

ARE YOU THE FIRST PERSON IN YOUR FAMILY TO ATTEND COLLEGE? (Circle One) YES NO

11. USE THE SPACE BELOW TO PRESENT ANY OTHER PERTINENT INFORMATION WHICH YOU FEEL MIGHT ASSIST US IN REVIEWING YOUR APPLICATION.

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IMPORTANT! PLEASE READ!

I do hereby swear that the information contained herein is, to the best of my knowledge, true and accurate. I am fully aware that any intentional falsification of information contained herein may result in the denial of the application or loss of any award received. I furthermore realize that this award may be revoked if I fail to meet the designated qualifications. I hereby authorize the release of my academic transcript and financial aid information to the Women's Bar Foundation.

Signature of Applicant: _____

Date: _____