

**La Verne College of Law Scholarship Application Form, 2018-2019**  
**for College of Law Students**  
**University of La Verne**

**Note: Please see the La Verne Law website for a description of available scholarships and their respective criteria. This form must be filled out on a computer, tablet, or smartphone and submitted electronically to [lawscholarships@laverne.edu](mailto:lawscholarships@laverne.edu). Forms that do not include an electronic signature, are not completed in full, or that contain erroneous information will be excluded from scholarship consideration.**

*To be eligible for a La Verne Law scholarship, the applicant must be a College of Law student who has completed a minimum of two semesters of academic work at La Verne Law.*

*To be considered for a College of Law Scholarship, this application must be submitted to [lawscholarships@laverne.edu](mailto:lawscholarships@laverne.edu) no later than 5:00 p.m. on January 11, 2019. Applications will be judged for their content as well as for their grammar, spelling, punctuation, and style.*

*Award winners will be announced by March 30, 2019. Awards will be disbursed to the accounts of recipients during spring semester, 2019.*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

University of La Verne ID Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

La Verne email address: \_\_\_\_\_

Expected month and year of graduation: \_\_\_\_\_

Check One:  Full-Time Student  Part-Time Student

Check Which Degree Pursuing:  J.D.  Joint Degree (Specify) \_\_\_\_\_

Some of the scholarships focus on certain practice area interests. List any specific areas of interest in which you are interested.

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Briefly describe why you believe you are qualified for a scholarship.

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Regarding a needs-based scholarship, explain why you have a financial need.

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You may request a professor to write on your behalf and send a separate recommendation to [lawscholarships@laverne.edu](mailto:lawscholarships@laverne.edu).

**Student Authorization:**

If applicable, I give my permission to release financial and financial aid data on file for the purpose of evaluating my application for a needs based scholarship. I agree to thank the Scholarship donor for providing the scholarship.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_