

V.I. BAR ASSOCIATION
Scholarship Application

FINANCIAL STATEMENT

EXPENSES PER SEMESTER

Tuition	\$ _____
University Fee	_____
Room	_____
Board	_____
Personal	_____
Transportation (air & ground)	_____
Books & Supplies	_____
Bar Review Materials	_____
Medical	_____
Student Activity Fee	_____
Health Service Fee	=====
 Total Expenses per Semester	=====

Matching Funds:

Law School Scholarship/Grant Please identify source(s) _____ _____ _____	_____
Student Loan Please identify source(s) _____ _____ _____	_____
Student Contribution Please identify source, or sources, (i.e., savings, family, etc.) _____ _____ _____	_____
 Total Funds:	=====

A. TO BE COMPLETED BY APPLICANT: (PLEASE TYPE - BE SURE TO FILL IN ALL BLANKS)

1. Name:(last name) _____
(first name) _____
(middle initial) _____

Social Security No.: _____
Date of Birth: Month _____ Day _____ Year _____
Sex: M _____ F _____
Place of Birth: _____ . If not a U.S. citizen, are you a permanent resident? _____ How long? _____

2. Current Address:
Street or Box No. _____
City _____ State _____ Zip _____
Telephone: _____

Years at present address: _____

Permanent Address in the V.I.:
Street or Box No. _____
City _____ State _____ Zip _____
Telephone: _____

Years at present address: _____

3. Dependent(s) _____
What is your contribution to the support of said Dependent(s)? _____

4. Local Contact Person: _____
Address: _____
Telephone: _____

B. SCHOOLING

1. List in order (beginning with last school attended) schools attended in the last four years:

NAME OF SCHOOL	ADDRESS	DATES ATTENDED	DEGREE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. LAW SCHOOL

2. Which school do you plan to attend: _____
Have you been accepted? _____

NAME	CITY & STATE	YES	PENDING
1 ST CHOICE: _____			
2 ND CHOICE _____			

D. FAMILY INFORMATION: (If you were domiciled with your parent(s) at any time over the past five years for any period of time, please complete 3-10.)

3. Father's Name _____
Living _____ Deceased _____
Mother's Name _____
Living _____ Deceased _____

4. Home Address: Telephone Number:

(Father) () ____ - ____

(Mother) () ____ - ____

5. Present occupation of parent(s):
Father _____
Mother _____

6. Name and address of parent(s) employer(s):
Father _____
Mother _____

7. Total income before taxes for last calendar year:
\$ _____ (Father)
\$ _____ (Mother)

8. Please list names and ages of all children in your family:

9. Names of those presently attending elementary, high school and/or college:

10. Cost of tuition for one year for each child listed in 9 above:

E. FAMILY INFORMATION: (Spousal information to be completed only if the applicant is married 11-18.)

11. Spouse's Name _____
Living _____ Deceased _____

12. Home Address: _____ Telephone Number: _____
(Spouse) _____ () ____ - _____

13. Present occupation:
Spouse _____

14. Name and address of employer(s):
Spouse _____

15. Total income before taxes for last calendar year:
\$ _____ (Spouse)

16. Please list names and ages of all children in your family:

17. Names of those presently attending elementary, high school and/or college:

18. Cost of tuition for one year for each child listed in 17 above:

F. EMPLOYMENT EXPERIENCE: (If additional space is needed, please use a plain sheet of white paper).

19. Please list jobs (including summer employment) you have held in the last 3 years:

JOB TITLE & WORK PERFORMED	EMPLOYER'S NAME & ADDRESS	DATES EMPLOYED	WAGES
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G. MILITARY: (If you have ever served in the military, please complete this section)

20. Military service dates: From _____ To _____
Branch of service _____ Serial Num. _____
Rank: _____ Discharge Date _____
Type of discharge _____
If disabled, what is disability rating? _____

H. EXTRACURRICULAR ACTIVITIES AND INTERESTS:

21. List your extracurricular activities and interests in order of importance:

22. List any honors or distinctions you have received:

**PLEASE CHECK CAREFULLY TO MAKE SURE YOU HAVE FILLED IN ALL
BLANKS. ANSWER FULLY AND COMPLETE ALL QUESTIONS.**

(PARENTS SIGNATURE REQUIRED FOR APPLICANTS UNDER 21)

(Date)

Applicant's Signature

(Date)

Father's (or guardian's) Signature

(Date)

Mother's (or guardian's) Signature

APPLICANT'S CERTIFICATION

I _____ declare under penalty of perjury that all of the information contained in this proposal for financial assistance is correct and true to the best of my knowledge.

I affirm that I am a permanent resident of the U.S. Virgin Islands and that I plan to engage in the practice of law in the U.S. Virgin Islands and, if I do not return to practice law in the U.S. Virgin Islands within 3 years after graduation from law school, I understand that the **grant will become a loan repayable with interest at the rate of 9% per annum** accruing from the date of receipt of the funds.

I agree that the decision on applicant selection is solely within the discretion of the Scholarship Committee of the Virgin Islands Bar Association, and I agree to be bound by that decision without further review of Committee selection.

Date _____ Signature _____