

JUSTICE PAULINE DAVIS HANSON SCHOLARSHIP
Established by Fresno County Women Lawyers
APPLICATION FOR SCHOLARSHIP

PART I-PERSONAL INFORMATION AND ACTIVITIES

NAME _____ PHONE _____
_____ First Middle Initial Last Home
ADDRESS _____ PHONE _____
_____ Street, Apt # City State Zip Code Work
E-MAIL _____

INDICATED DATES OF FRESNO, KINGS MADERA, TULARE COUNTY
RESIDENCY _____

NUMBER, AGES OF DEPENDENTS _____

EMPLOYER'S NAME _____

WORK PERFORMED AND POSITION _____

_____ YEAR OF EXPECTED
LAW SCHOOL NAME _____ GRADUATION _____

UNDERGRADUATE AND GRADUATE SCHOOLS ATTENDED:

_____ Degree _____ Date _____
_____ Degree _____ Date _____

L.S.A.T. _____ COLLEGE G.P.A. _____ LAW SCHOOL G.P.A. _____

(Attach most recent law school transcript to application - finalists can bring updated transcript to interview.)

THIS SCHOLARSHIP IS AWARDED ON THE BASIS OF ACADEMIC
ACHIEVEMENT, SCHOOL AND COMMUNITY ACTIVITIES, DEMONSTRATED
LEADERSHIP ABILITIES, FINANCIAL NEED, AND TIES TO FRESNO AND
SURROUNDING AREA (IF ANY.)

LIST PERTINENT ACTIVITIES; ATTACH ADDITIONAL PAGE IF NECESSARY:

- 1) _____ Dates _____
- 2) _____ Dates _____
- 3) _____ Dates _____

PART II - NARRATIVE

PLEASE ATTACH A NARRATIVE, NO LONGER THAN ONE TYPED PAGE,
DISCUSSING YOUR CAREER GOALS, ACTIVITIES, HONORS AND SPECIAL
AWARDS RECEIVED. DO NOT USES OUTLINE FORM.

PART III - FINANCIAL INFORMATION

PLEASE COMPLETE THE ANNUAL INCOME AND EXPENSES STATEMENT IN DETAIL. APPLICATIONS SUBMITTED WITHOUT THIS INFORMATION **WILL NOT BE CONSIDERED**. ATTACH FRONT PAGE (without schedules) OF FEDERAL INCOME TAX RETURN FOR LAST TAX YEAR. PLEASE BLACK OUT PRIVATE INFORMATION.

| <u>STUDENT ANNUAL EXPENSES</u> | <u>STUDENT'S ANNUAL INCOME</u> |
|---|--|
| Tuition, Fees _____ | Student's net wages _____ |
| Books _____ | Spouse's net wages _____ |
| Supplies _____ | Aid from parents _____ |
| Spouse's Educational Expense _____ | Aid from others _____ |
| Rent/Mortgage _____ | Social Security _____ |
| Utilities _____ | Veteran's Benefits _____ |
| Clothes _____ | Scholarships, Fellowships, Grants _____ |
| Cleaning _____ | Loans _____ |
| Food/Household _____ | Income tax refunds _____ |
| Transportation _____ | Spousal, child support _____ |
| Child care _____ | Other income _____ |
| Medical, dental _____ | Please attach an explanatory paragraph if you have other financial data which the Committee should consider. |
| Debt repayment _____ | |
| Outstanding balance on student loans: _____ | Undergraduate _____ |
| | Law School _____ |

I declare under penalty of perjury under the laws of the State of California that the information supplied in this Application and attachments is true and correct.
I agree to inform the Committee of any changes which may occur in this information.

Date _____ Applicant's Signature _____

Mail or fax completed application, including attached copy of law school transcript, copy of redacted front page of last year's income tax return (or explanation for lack of same) and narrative page, to:

Fresno County Women Lawyers Scholarship Committee
c/o Nancy J. Stegall, Esq
2445 Capitol Street, Suite 140
Fresno, CA 93721-2267
Fax: (559) 237-6807
E-mail: nstegall@cv-familylaw.com

APPLICATION MUST BE RECEIVED ON OR BEFORE 5:00 P.M. May 31, 2013
(Revised March 25, 2013)