

**HISPANIC LAWYERS SCHOLARSHIP FUND OF ILLINOIS (“HLSF”)
FIRST YEAR LAW STUDENT SCHOLARSHIP APPLICATION
2016-2017 ACADEMIC YEAR**

SUBMISSION DEADLINE: FRIDAY, FEBRUARY 17, 2017

All information is solicited for the sole purpose of assisting the HLSF Scholarship Committee in the evaluation of applicants. The information will be kept strictly confidential and will be disseminated only to the HLSF Trustees. All questions must be fully answered. Applicants may attach additional pages if necessary to explain any answer. By submitting this application, the applicant consents to verification by the Scholarship Committee of the information furnished herein.

SECTION I - IDENTIFYING INFORMATION

1. Name: _____

2. Current Mailing Address:
Street: _____ Apt. _____
City: _____ State: _____ ZIP: _____
Phone: _____
E-mail: _____

3. Permanent Address:
Street: _____ Apt. _____
City: _____ State: _____ ZIP: _____
Phone: _____
E-mail: _____

4. Place of Birth:
City: _____ State: _____ Country: _____

5. Name of Parent(s) of Hispanic Ancestry _____
Place of Birth: _____

SECTION II - FINANCIAL INFORMATION

6. Were you claimed as a Dependent on anyone's Federal Tax Return for the 2015 Tax Year?__ If so, specify relationship of person(s) claiming you. _____

7. Will you be claimed as a Dependent on anyone's Federal Tax Return for the 2016 Tax Year?_____ If so, specify relationship of person(s) claiming you. _____

8. How much monetary support will your parents or guardians provide during the 2016-2017 school year? \$ _____
9. What is your Marital Status? Single_____ Married_____
10. Spouse's Information. This Section must be completed if the applicant is married.
- (a) Will your spouse be a student during the 2016-2017 school year?_____ If so, full or part time? _____ Name and location of school _____

- (b) Will your spouse be employed during 2016-2017? If so, full or part time?_____
- Employer: _____
Position: _____
Average Monthly Salary: \$ _____
11. Did you or do you expect to claim any Dependent on your Federal Tax Returns for the 2015 and 2016 Tax Years?_____
12. Please describe your three most recent jobs.
- (a) Employer: _____
City: _____ State:_____ ZIP: _____
Dates: _____ Salary: \$ _____
Job Description: _____

(b) Employer: _____
 City: _____ State: _____ ZIP: _____
 Dates: _____ Salary: \$ _____
 Job Description: _____

(c) Employer: _____
 City: _____ State: _____ ZIP: _____
 Dates: _____ Salary: \$ _____
 Job Description: _____

13. Do you expect to be employed during the 2016-2017 school year? _____
 Employer: _____
 City: _____ State: _____ ZIP: _____
 Dates: _____ Salary: \$ _____
 Job Description: _____

14. What was your total income from all sources for the 2015 and 2016 Tax Years (include your spouse's income)? \$ _____

15. What is your estimated total income from all sources for the 2017 Tax Year (include your spouse's income)? \$ _____

16. List all financial aid received or expected from any source for the 2016-2017 school year.

<u>Loans</u> (specify type)	<u>Source</u>	<u>Amount</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

<u>Scholarships</u>		<u>Amount</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Work/Study

_____ \$ _____

Other

_____ \$ _____

SECTION III - ACADEMIC INFORMATION

17. High School Name: _____

City: _____ State: _____

18. Undergraduate Institution

Name: _____

City: _____ State: _____

Dates of Attendance: _____ Date of Graduation: _____

Honors, Awards, or Special Recognitions: _____

Extracurricular Activities: _____

19. Graduate Institution (other than law school)

Name: _____

City: _____ State: _____

Dates of Attendance: _____ Date of Graduation: _____

Honors, Awards, or Special Recognitions: _____

Extracurricular Activities: _____

20. Law School

Name: _____

City: _____ State: _____

Are you a first or second year student? _____

Day/evening _____

Full-time/part-time _____

Anticipated date of graduation: _____

GPA: _____ Grading Scale: _____

Class Rank: _____

Honors, Awards, or Special Recognitions: _____

Extracurricular Activities: _____

21. Have you previously attended any other law school? _____

If so, please explain _____

SECTION IV - COMMUNITY SERVICE INFORMATION

22. Describe any community service activities.

Dates	Organization/Activity	Role/Position/Title
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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SECTION V - OTHER INFORMATION

23. What is your level of proficiency in the Spanish language? _____

24. What are your career goals? _____

25. Where do you intend to practice after law school? _____

26. Have you ever been convicted of any crime, other than a moving traffic violation? If so, please attach a detailed explanation.
27. Please explain in two pages or less why your background and experience illustrate a commitment to the legal and social needs of the Latino community.
28. We would appreciate one letter of recommendation from an individual (who is not related to you) who knows you personally.

SECTION VI - OTHER REQUIREMENTS

All scholarship finalists may be asked to appear before the HLSF Scholarship Selection Committee for a brief interview as a condition of further consideration by the Committee. If an in-person interview cannot be arranged, HLSF may, in its discretion, arrange for a phone interview.

Recipients will be honored at a reception, which will be held on Thursday, April 20, 2017 in Chicago, Illinois. Please let the Committee know if you would be unable to attend the reception if you are selected as a recipient.

SECTION VII - APPLICANT'S CERTIFICATION

I hereby certify that:

1. I am not related to any officer or trustee of the Hispanic Lawyers Scholarship Fund.
2. I am currently registered as a law student at the ABA accredited law school identified in this application.
3. All information contained in this application is true and correct to the best of my knowledge and belief.

Signature _____

Date _____

Please return the completed application by **Friday, February 17, 2017** to:

Hispanic Lawyers Scholarship Fund of Illinois
c/o Joseph J. Torres, Chairperson
Winston & Strawn LLP
35 West Wacker Drive
Chicago, Illinois 60601
Fax: (312) 558-5700
Email: jtorres@winston.com

For additional information, contact Joseph Torres at (312) 558-7334 or jtorres@winston.com