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| **C:\Users\myerstj\AppData\Local\Microsoft\Windows\INetCache\Content.Word\MALL-JPEG - edit small.jpg** | **Minnesota Association of Law Libraries**  **Scholarship Application** |

**Applicant Information**

* Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Educational Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Degree Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* MALL Membership (years): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* MALL Activities (include dates of service): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* Have you received a scholarship from MALL in the past? \_\_\_\_\_Yes \_\_\_\_\_No

* If yes, when did you receive this scholarship? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please attach the following items to your application:**

* A certified copy of your transcript from the school you are currently attending.
* Your current resume, listing your education, work experience, professional and/or organizational memberships and activities, and publications.
* A brief personal statement discussing your career goals as a law librarian, progress in this program, and anything further that would assist the committee. This statement should be no longer than two pages, double-spaced. Please do not exceed the page limitation.

*Incomplete or late applications will not be considered!*

**Statement of Acknowledgement**

I understand and agree that if I receive a scholarship and for any reason fail to maintain the eligibility requirements or fail to complete the coursework during the semester for which the scholarship was awarded, I will immediately notify the MALL Awards Committee Chair. I also understand that, depending on the circumstances, I may be required to repay all or part of the scholarship.

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

**Submission**

Mail, fax, or email this form with all necessary attachments **by 5:00 pm (CST), of the second Friday in April of the current year.**

Shannon Stoneking, Chair

Dakota County Law Library

1590 Highway 55, Hastings MN 55033

Phone: 651-438-8080

Email: Shannon.Stoneking@co.dakota.mn.us