## THE UNIVERSITY OF AKRON SCHOOL OF LAW THE ROBERT E. DONOVAN MEMORIAL SCHOLARSHIP 2013-2014 Scholarship Application

Full Name:			Student ID Number:			
Mailing Address:						
City/State/Zip:						
Cell Phone or Other Phone:	E-	Mail:				
My division for the <mark>2013-2014</mark> year will be: (check one)		FULL-TI	<u>ME</u>	OR	PART-TIME	
	2 <sup>nd</sup> Year					
	3 <sup>rd</sup> Year					
	4 <sup>th</sup> Year					

## A WORD REGARDING THIS APPLICATION:

- ✓ A one-page essay, which will be reviewed by members of the Donovan Family, is required for consideration of The Robert E. Donovan Scholarship.
- ✓ Your full name and the name of the scholarship are to be centered at the top of your essay, and your essay and other attachments should be paper clipped to this application form.
- ✓ Your essay should address the following items
  - Where are you from originally?
  - o What factors resulted in your decision to study law?
  - What area of law do you plan to pursue and why?
  - What are your future career goals?
  - What makes you stand out (highlight awards, activities, leadership skills, etc.)?
  - Why do you need this scholarship (explain your circumstances of financial need)?
- ✓ OPTIONAL: A cover letter and resume, if you wish to further detail your scholarship qualifications. The cover letter and resume should not exceed one page each.

## **Certification and Acknowledgement of Responsibility**

I certify that to the best of my knowledge the information herein is true. I understand that any misrepresentation of facts on this application and attachments could be cause for a misconduct investigation. I also certify that any scholarship or other aid from The University of Akron will be used for my legal education.

Date

Signature of Applicant

## **RETURN COMPLETED APPLICATION FORM AND ESSAY NO LATER THAN FEBRUARY 14, 2013:**

Assistant Dean Lauri S. Thorpe The University of Akron School of Law Akron, OH 44325-2901