



Akron Bar Foundation

57 S. Broadway Street, Akron, Ohio 44308

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www.akronbar.org

Scholarship Application

2016-2017

The Akron Bar Foundation provides scholarships to law students based on grade point average, affiliation with Summit County, history of community involvement and financial need.

Carefully complete the accompanying scholarship application and return to: The Akron Bar Foundation, Attention: Director of Development, 57 South Broadway Street, Akron, Ohio 44308. **Applications MUST BE postmarked NO LATER THAN Friday, February 26, 2016.** Qualified applicants will be contacted to arrange for an interview, which will take place during the last week of April.

Qualified Applicants Must Meet ALL of the Following Criteria:

- ☐ You are a citizen of the United States
- ☐ You have been admitted to a law school in Ohio
- ☐ You are in good academic standing with your school(s)
- ☐ You have an affiliation with Summit County
- ☐ You have a demonstrated history of community involvement
- ☐ You have a strong financial need

In Order for your Application to be Considered, You Must Submit the Following TYPED Information:

- ☐ A formal letter indicating:
 - How and why you became a law student
 - Your connection(s) to Summit County
 - Your volunteer and extracurricular involvement currently and in the past
 - Your strong financial need / the reason(s) we should award you a scholarship
- ☐ An updated resume
- ☐ A completed and typed application (This application is a form that can be completed on your computer)
- ☐ A certified transcript from your school(s)
(Be sure to request your transcript well in advance as your transcripts need to be mailed directly to the Foundation by your school(s))
- ☐ A copy of your 2014 Federal Income Tax Return (or 2013 if 2014 is not available)
- ☐ Two letters of recommendation from people who are familiar with your character
(No relatives please. Be sure to request your letters of recommendation well in advance as recommendations need to be mailed directly to the Foundation by the writer.

Note: We regret that we must return applications postmarked AFTER Friday, February 26, 2016. Late and/or incomplete applications will not be considered for an award.

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PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

Phone: _____ Cell: _____ Email: Do you check your email daily? ☐ YES ☐ NO

Current Address: _____

City: _____ State: _____ Zip Code: _____

Permanent Address: _____

City: _____ State: _____ Zip Code: _____

☐ List all residences you have had other than the above for the last five (5) years (use additional space on back)

Date of Birth: ____ / ____ / ____ Place of Birth: _____

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Number of Dependent Children: _____

Are you currently a resident of Summit County? ☐ YES ☐ NO

IF NO, list dates and locations of past residency in Summit County:

Are you presently registered to vote? ☐ YES ☐ NO IF YES, Location: _____

Have you ever been convicted of a crime (other than a minor misdemeanor or a traffic violation)?

☐ YES ☐ NO IF YES, List Offense(s), date(s), city and state: _____

Comments: _____

ACADEMIC INFORMATION

Please Indicate Last High School Attended and All Collegiate Institutions

Institution Name: _____

City: _____

State: _____

Years Attended: _____

Major: _____

Degree: _____

Graduation: _____

Institution Name: _____

City: _____

State: _____

Years Attended: _____

Major: _____

Degree: _____

Graduation: _____

If you have performed any military service, please describe: _____

ACADEMIC INFORMATION CONTINUED...

Are you presently attending law school? ☐ YES ☐ NO

IF YES, Where: _____

IF NO, have you been admitted to a law school: ☐ YES ☐ NO

IF YES, Where: _____

Expected law school graduation date: _____

Indicate Number of Credits You Plan to Carry in 2015-2016: _____

Does this constitute ☐ Full-Time or ☐ Part-Time Status?

If you are currently in law school, are you currently on academic probation? ☐ YES ☐ NO

If you are currently in law school, are you currently on disciplinary probation? ☐ YES ☐ NO

COMMUNITY INVOLVEMENT

Please detail your *past* volunteer and extracurricular activities.

Please detail your *current* volunteer and extracurricular activities.

FINANCIAL AID INFORMATION

Please state the amount of scholarship you are seeking from the Akron Bar Foundation for the coming year.

\$ _____

Have you received prior scholarship aid from the Akron Bar Foundation? ☐ YES ☐ NO

IF YES, please provide details: Date (School Year: ____ & the Amount: \$ _____)

Please state any other scholarships that have already been granted to you for the coming school year, by name and amount received or to be received:

Please state any other scholarships that you are seeking for the coming school year, by name and amount requested:

Do you have savings, inheritance or other sources of income which are assisting you or will assist you in connection with your education, other than as set forth above? If so, please provide details:

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ASSET AND DEBT INFORMATION
(If Married, Include Total for Husband & Wife)

DESCRIPTION OF ASSETS:

AMOUNT:

Cash on Hand	\$
Checking Account(s) Balance(s)	\$
Savings Account(s) Balance(s)	\$
FMV of Home (owned or mortgaged)	\$
Automobile(s)	\$
Other Vehicle(s)	\$
FMV of Household Goods	\$
Other Assets Owned (Stocks, Bonds, etc.)	\$
TOTAL ASSETS:	\$

DESCRIPTION OF LIABILITIES:

AMOUNT:

Student Loans Owed	
Other Personal Loans Owed	
Mortgage Owed on Home (to date)	
Mortgage Owed on Other Property (to date)	
Amount Owed on Credit Cards	
Other Debts:	

TOTAL LIABILITIES:

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ESTIMATE OF CASH RECEIPTS AND DISBURSEMENTS FOR THE YEAR

(Please Complete the Following Estimate for the 2015-2016 School Year, Reflecting Income & Expenses for the Family Unit, I.E. Yourself, Spouse & Children)

ESTIMATED CASH RECEIPTS

TOTAL FOR 12 MONTHS (June to May)

Gross Salary or Commissions
Rental Income
Interest Income
Dividend Income
Trust Income
Refund of Taxes Withheld
Grants, Scholarships, etc.
Loans from Relatives, Friends, etc.
Student Loans
Personal Loans
Gifts
Other Receipts

TOTAL ESTIMATED CASH RECEIPTS

ESTIMATED DISBURSEMENTS

TOTAL FOR 12 MONTHS (June to May)

Food
Rent
Taxes
Mortgage Payments
Maintenance of Home
Clothing
Insurance
Medical, Dental, etc.
Personal Loan Payments
Tuition
Books
Alimony / Child Support
Transportation (Including Fuel / Maintenance)
Entertainment, Vacation, etc.
Other Disbursements:

TOTAL ESTIMATED DISBURSEMENTS:

NET CASH AT THE END OF THE YEAR:

(RECEIPTS LESS DISBURSEMENTS):

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YOUR PERSONAL NET WORTH

TOTAL ASSETS: \$ _____

LESS TOTAL LIABILITIES: \$ _____

PERSONAL NET WORTH: \$ _____

I CERTIFY THAT ALL INFORMATION CONTAINED HEREIN IS TRUE TO THE BEST OF MY KNOWLEDGE.

NAME (TYPED)

DATE

SIGNATURE