

CAL NORTHERN SCHOOL OF LAW SCHOLARSHIP APPLICATION

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness a	and neatness ensure your application will be re	viewed properly.	Application	on postmark de	adline June 15	
APPLICANT	Last Name	First		Middle Initial		
DATA	Permanent Home					
	Mailing Address			Apt. #		
	City	State		Zip Code		
	Telephone ()	Cell Phone(_)			
	Email Address					
	Please indicate your status. (For statistical purpo	oses only)	Male		Female	
	African American/Black	Asian	American/Pacific Is	lander		
	Hispanic/Latino Nati		ve American/American Indian			
	■ White					
additional shee	me does not replace any part of this application ets. Attachments must follow the same format. dress and name of this scholarship program sho	DO NOT repeat in	formation already		•	
WORK EXPERIENCE	Describe your paid work experience during the past four years (e.g., office work, professional work; if stay home parent, please indicate). Indicate dates of employment for each job and approximate number of hours worked each week.					
	Name of Employer	Position Held	From-Mo/	Yr To-Mo/Yr	Hour per week	
			+			
			<u> </u>			
COMMUNITY SERVICE	List community service activities in which you have participated.					
ACTIVITIES	Activity From	n-Mo/Yr To-M	lo/Yr Ot	Offices Held or Description of Participation		
GOALS	Make a brief statement or summary of your plar	as as they relate to you	ir educational and c	areer objectives a	nd goals	
STATEMENT	Make a brief statement of summary of your plan	is as they relate to you	ii eddcationai and c	areer objectives a	ina goais.	
•	-					

JNUSUAL	Please describe how and when any	Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work						
CIRCUMSTANC	experience, or your participation in	experience, or your participation in school or community activities.						
	•							
INANCIAL	Instructions for this section a	are provided in t	the guidelines.					
DATA	To be considered for a need-ba	To be considered for a need-based award, this section must be filled out completely.						
	Check here if you are applying for a merit award only - you may leave this section blank.							
	If you are independent, information	If you are independent, information about you and your spouse (if applicable) should be provided. Adjusted gross income and total						
	federal income tax amounts should	federal income tax amounts should be from the most recently filed tax return.						
	If you are a dependent student, plea	If you are a dependent student, please have your parent/guardian complete this section.						
		_						
		☐ I am an independent student. The data below represents my finances. ☐ I am a dependent student. The data below represents my parents' finances.						
	I I am a dependent student. The data	a below represents r	ny parents' finances.					
	State of Residence		7. Total Cash, Checking, Savi	ngs, and Cash Value of				
	Adjusted Gross Income (FORM 1040)	\$	=	_	Ś			
	3. Total Federal Tax Paid (FORM 1040)	\$		•	¥			
	4. Total Income of Parent (Self)	\$	household and primarily supp	_				
	5. Yearly Untaxed Income and Benefits:		reporting income.	,	#			
	Please indicate source -		9. Marital Status of parent, g	guardian or self:				
	Social Security		Married	Divorced	Single			
	Child Support		Separated	Widowed	_			
	Other	\$	10. Of the total number of fa	mily members on line 8,	number of			
	6. Medical and Dental Expenses not paid		students attending college at	students attending college at least half-time during the next				
	by insurance (exclude premiums)	\$	school year (include applican	t, exclude parents)	#			
RANSCRIPTS	A complete transcript of grades mus	st be sent with this a	application (unless already submitte	d with an Application f	for Admission).			
APPLICATION	The applicant is responsible for sub-	mitting all materials	to Cal Northern's Scholarship Comr	nittee on time. Incom	plete applications			
CHECKLIST	will not be evaluated. This applicati	on becomes comple	ete and valid only when all of the fo	lowing materials have	been received:			
	Student Application			All materials, including transcript, must be addressed to:				
	Complete transcript(s) of grades		CAL NORTHERN SCHOOL	OF LAW				
		Copy of page one and two of 1040 income		SCHOLARSHIP PROGRAM				
	tax form if applying for a need-based award		_	1395 Ridgewood Drive, Ste. 100				
			Chico, CA 95973					
	Postmark deadline June 15							

Page	3	οf	3

CERTIFICATION	Cal Northern's Scholarship Committee has the sole responsibility for selecting recipients based on criteria as set forth in the program's description. I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including an official transcript of grades and a copy of my U.S. Income Tax Return. Falsification of information may result in termination of any award granted.		
	Applicant's Signature	Date	
	Parent's Signature	Date	
	(Required if student is a dependent.)		