

BRONX COUNTY BAR ASSOCIATION

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February 2023

The Bronx County Bar Association is proud to announce that for the academic year commencing September 2022, we will again award the Honorable Peggy Bernheim Memorial Scholarship in the amount of \$6,000.00 and the Craig Lensch Memorial Scholarship in the amount of \$6,000.00.

These scholarships are available to eligible, deserving first and second year law students, or third year law students expecting to graduate in May or June 2023 who are domiciled in Bronx County. The scholarships will be presented at our Annual Dinner on Thursday, April 27, 2023, at the Marina del Rey. Recipients **MUST** attend the Dinner to receive their award.

Please make your students, who reside in Bronx County, aware of this opportunity.

Completed applications, with official transcripts, must be received by our offices no later than **March 24, 2023**.

Your assistance in helping us identify worthy recipients will be greatly appreciated. Contact Mary Conlan at Mary@bronxbar.com with any questions.

Very truly yours,

Michael Barsky
President

BRONX COUNTY BAR ASSOCIATION

851 Grand Concourse, Room 124

Bronx, New York 10451

mary@bronxbar.com

SCHOLARSHIP APPLICATION FORM

Eligibility Guidelines

1. First and Second Year Law Students, and Third Year Law Students expecting to graduate in May or June 2023.*
2. Proof of Enrollment at an A.B.A. accredited school.
3. Proof that Bronx County is Applicant's Domicile (driver's license, non-driver's i.d., utility bill, etc.)
4. **Scholarship Committee shall make its determinations based on a combination of the following criteria:**
 - (a) **Academics;**
 - (b) **Financial Need;**
 - (c) **Writing Sample;**
 - (d) **Personal Interview, if requested**
 - (e) **Law School Transcript; and**
 - (f) **Personal Statement.**
5. Application along with **official college and law school transcripts and writing sample** to be filed no later than **MARCH 24, 2023** with the Bronx County Bar Association at the above address or emailed to mary@bronxbar.com, subject line **SCHOLARSHIP**.
6. **The Bronx County Bar Association will award two scholarships each in the amount of \$6,000.00.** Scholarship recipients **MUST** attend the Bronx County Bar Association's Annual Dinner on **Thursday, April 27, 2023**. Contact Mary Conlan at mary@bronxbar.com if you have any questions,

* **First Year Students must Have Completed One Semester of Study to Be Eligible to Apply.**

PLEASE PRINT OR TYPE ALL RESPONSES:

Name _____
First Middle Last Maiden

Current Mailing Address: _____

Telephone Numbers: _____
Mobile Land Line E-Mail

Permanent Address: _____

Telephone Numbers: _____
Day Evening

Marital Status: _____ Social Security Number: _____

Male _____ Female _____ Date of Birth: _____
month/day/year

Place of Birth: _____ U.S. Citizen: Yes _____ No _____
City State Country

How did you first learn of the BRONX COUNTY BAR ASSOCIATION ?

A. EDUCATION:

1. Name of Law School, Address & Dates Attended:

2. Expected date J.D. Degree: _____
Month/Year

3. Name; Location: Dates Attended; Major Degree Received or Expected from Schools previously attended:

High School: _____

Undergraduate College or University: _____

Graduate College or University: _____

Other:

Please list academic honors, prizes or scholarships you received in College/University:

Please list your extra-curricular activities (include sports and community activities):

ATHLETIC ACCOMPLISHMENTS: List all awards (including high school, college and current):

B. FAMILY INFORMATION

The following information must be provided whether or not you consider yourself independent.

1. Father's Name: _____

Occupation: _____

Annual salary: _____

2. Mother's Name: _____

Occupation: _____

Annual Salary: _____

3. List below the names and ages of all your brothers and sisters:

Name Age Name of School & Grade Indicate if living w/ parents

a. _____

b. _____

c. _____

d. _____

e. _____

f. _____

4. Do you reside in your parents household? _____

5. The total size of your parents household? _____

C. APPLICANT INFORMATION:

1. Total size of your household (including the yourself, spouse and applicant's dependents: _____

2. Name of Spouse: _____

3. Spouse's Employer, Occupation and Annual Salary: _____

4. Applicant's dependents outside the home: _____

5. Applicant's Employment History:

Name of Employer; Address; Position Held; Dates Employed; Salary

6. Financial Information:

a. Total Educational Indebtedness: _____

Please list all amounts and sources for each educational loan incurred.

<u>Source</u>	<u>Date Incurred</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

b. Total Amount of Other Indebtedness: _____

<u>Creditor</u>	<u>Date Incurred</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. Budget:

This budget covers the upcoming academic year based on attendance at _____ Law School.

Expenditures (estimated)

<u>A. School Expenses</u>	<u>Amount</u>
(1) Tuition	_____
(2) Fees	_____
(3) Books/Supplies	_____
(4) Other (specify)	_____

<u>B. Living Expenses</u>	<u>Amount</u>
(1) Rent: Campus/off-campus	_____
(2) Food	_____
(3) Utilities	_____
(4) Travel to and from school	_____
(5) Other (Specify)	_____

<u>C. Personal Expenses</u>	<u>Amount</u>
(1) Clothing	_____
(2) Auto	_____
(3) Medical & Dental	_____
(4) Recreation	_____
(5) Life Insurance	_____
(6) Other (specify)	_____

TOTAL EXPENSES: _____

8. RESOURCES (estimated)	<u>Amount</u>
(1) Savings	_____
(2) Veterans Benefits	_____
(3) Parents	_____
(4) Relatives/friend	_____
(5) Spouse's earnings	_____
(6) Your earnings	_____
(7) Expected Scholarships (specify sources)	_____

_____	_____
Name	Amount
_____	_____
Name	Amount

TOTAL RESOURCES: _____

D. PERSONAL STATEMENT

Submit a typewritten statement of not more than 500 words on one of the following topics:

1. What in your background leads you to believe that you will be a successful lawyer?
2. What do you see is your role as an attorney?

APPLICANT'S STATEMENT: I hereby affirm that all the foregoing information is correct. I further agree to submit all official documentation in order to verify the information reported on this form, if so requested.

Signature of Applicant: _____ Date _____