**ABOUT THE 2023 AWARD**

The Durham County Bar Foundation, Inc. grants the Adam Lischer Memorial Scholarship Award to qualified students who are enrolled in law school in North Carolina. The award amount varies from year to year. In most years, there is one award, valued at either $1500 or $2000, depending on the number of scholarships awarded. The awards are paid directly to the recipient(s) by check.

The Adam Lischer Memorial Scholarship Award is based on three criteria; (1) connection to Durham County; (2) financial need, and (3) academic or professional achievement. As a part of the application process, please complete the following form and submit **two letters of reference and recommendation** supporting the applicant’s qualifications and achievements. In completing this application, please attach additional sheets as needed to provide the requested information. **Please complete the Word document version of this document, if possible; typed responses are preferred.**

**Full Name**

**Email address (REQUIRED):**

Current Mailing Address

Telephone Number **(REQUIRED)**

Date of Birth

Marital Status 🞎 Single 🞎 Divorced 🞎 Married 🞎 Separated

Number of Minor Children

**(REQUIRED)** Have you been a resident of Durham County? Check all boxes that apply.

🞎 Native 🞎 Live here now 🞎 While undergraduate or graduate student, list years \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 Own property but do not reside here now 🞎 Lived in Durham previously for \_\_\_\_\_\_\_\_\_\_ years

**(REQUIRED)** List all addresses at which you have resided in Durham County and dates at each residence:

**Community Involvement:** Please detail your involvement with the Durham community, including any organizations you belong(ed) to. In providing this information, be sure to explain both the length and depth of your involvement. Please feel free to attach extra pages or insert extra text.

**EDUCATION**

Undergraduate Degree Institution:

Degree Conferred: Year: GPA:

Academic, Service, & Leadership Honors and Awards Received, Date of Receipt:

Non-Legal Graduate Degree Institution:

Degree Conferred: Year: GPA:

Academic, Service, & Leadership Honors and Awards Received, Date of Receipt:

Law School Institution: Enrolled (example: Fall ‘13):

Current GPA/Class Rank: Expected Graduation (Month/Year):

Academic, Service, & Leadership Honors and Awards Received, Date of Receipt:

Is there anything not self-explanatory about your academic record? What should the committee know that is not obvious?

**PLEASE FORWARD AN OFFICIAL ACADEMIC TRANSCRIPT FROM YOUR LAW SCHOOL. IT MUST LIST YOUR CUMULATIVE COURSES / GRADES INCLUDING THE LAST COMPLETED ACADEMIC SEMESTER AND ANY GRADES AVAILABLE FOR THE CURRENT SEMESTER.**

If your transcript is not immediately available, you may print your online grade report, with a transcript to follow. You must state your overall GPA and class rank (if available) and forward your transcript as soon as possible.

**INCOME AND EXPENSES**

**Briefly** outline your current year financial position, which lists expenses and the financial resources by which you expect to meet those needs. You may either use the table below, or write a few paragraph / essay about your financial situation and how you would use the award. This is not meant to be an exhaustive list. It simply gives the committee a general picture of your overall financial condition. **Remember that this award is not primarily need-based.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Expenses** |  |  | **Resources** |  |
| Tuition, Fees |  |  | Family/Spousal Contrib. |  |
| Rent, Utilities |  |  | Student Contribution |  |
| Food |  |  | Scholarships/Grants |  |
| Books |  |  | Loans |  |
| Transportation |  |  | Employment (concurrent) |  |
| Clothing |  |  | Other income sources |  |
| Insurance |  |  |  |  |
| Other expenses |  |  |  |  |
| **Total** |  |  | **Total** |  |

Will your financial position change materially for the upcoming academic year? Please detail any significant new expenses or loss of existing financial resources.

Other than the preceding information, have you ever been a recipient of financial aid in the past in connection with your higher education?

**Specific Information Concerning Assets:**

List below any property you own exceeding $3,000.00 in value.

For other significant expenses, attach explanatory sheet.

**EMPLOYMENT HISTORY**

**PRESENT EMPLOYMENT**

Employer

Position

Time and Length of Employment

Amount of Salary or Other Compensation

**PREVIOUS EMPLOYER #1 (PREVIOUS THREE EMPLOYERS)**

Employer

Position

Time and Length of Employment

Amount of Salary or Other Compensation

**PREVIOUS EMPLOYER #2**

Employer

Position

Time and Length of Employment

Amount of Salary or Other Compensation

**PREVIOUS EMPLOYER #3**

Employer

Position

Time and Length of Employment

Amount of Salary or Other Compensation

**BACKGROUND**

Have you ever been a plaintiff or defendant in a civil lawsuit? 🞎 No 🞎 Yes

If yes, list the case name, number, State/district, and a brief description of each such action.

List any convictions that you have on record.

**PERSONAL STATEMENT**

Please provide any other information you feel would help the committee in reaching a decision. We are particularly interested in (1) why you have chosen law as a career, (2) any particular area of law that interests you and how you see yourself working in that area in the future, and (3) the academic or professional achievement which warrants your selection. You may also attach a separate statement.

**COVID-19 PANDEMIC IMPACT STATEMENT**

If your previous statements did not include information related to the pandemic, but there is more we should know, please include that statement here. You may tell us how the pandemic has impacted your life and/or community, or you may tell us how you have responded to this impact, or both. You may also attach a separate statement.

**STUDENT CERTIFICATION, AUTHORIZATION, AND AGREEMENT**

I CERTIFY that the information reported in this application for scholarship grant and any attachments submitted herewith are true, correct, and complete to the best of my knowledge. I authorize use of information on this form by the Durham Bar Foundation, Inc. Adam Lischer Memorial Scholarship Award Committee. I authorize release and exchange of information between the Committee and educational institutions and agree that such information exchanged may include financial, enrollment, academic status and such other information as may be necessary to assure proper administration or student scholarship grants by the Award Committee and institutional program administrators. I also acknowledge that providing false or misleading information will be grounds for not only my disqualification from this award, but may be reported to my school and the State Bar.

Applicant's Signature Date of Signature

*You may create a digital signature or simply type your name and date the file.*