

**OCEAN COUNTY BAR ASSOCIATION  
MEMORIAL SCHOLARSHIP**

**APPLICATION FORM**

DATE: \_\_\_\_\_

NAME:

\_\_\_\_\_

HOME ADDRESS:

\_\_\_\_\_

AGE:

\_\_\_\_\_

DATE OF  
BIRTH:

\_\_\_\_\_

PLACE OF  
BIRTH:

\_\_\_\_\_

\_\_\_\_\_

NAME OF COLLEGE:

\_\_\_\_\_

COLLEGE MAJOR:

\_\_\_\_\_

COLLEGE MINOR:

\_\_\_\_\_

\*STANDING IN CLASS COLLEGE/LAW  
SCHOOL:

\_\_\_\_\_

NUMBER IN CLASS COLLEGE/LAW  
SCHOOL:

\_\_\_\_\_

HONORS:

\_\_\_\_\_

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COMMUNITY ACTIVITIES:

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REASONS YOU ARE PURSUING A LEGAL EDUCATION:

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**\* Attach Latest Transcript**

LAW SCHOOL YOU EXPECT TO ATTEND NEXT YEAR OR IF PRESENTLY ENROLLED--WHAT YEAR:

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FROM WHAT SOURCE DO YOU EXPECT TO OBTAIN FUNDS FOR SCHOOL?

<u>SCHOLARSHIP/GRANT</u>	<u>PARENTS/SPOUSE:</u>	<u>LOANS:</u>
AMOUNT: _____	AMOUNT: _____	AMOUNT: _____
<u>PART-TIME WORK:</u>	<u>SAVINGS:</u>	<u>OTHER:</u>
AMOUNT: _____	AMOUNT: _____	AMOUNT: _____

REASONS YOU THINK YOU QUALIFY FOR THIS SCHOLARSHIP:

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REFERENCES FOR CHARACTER ENDORSEMENT

<u>NAME</u>	<u>ADDRESS</u>	<u>OCCUPATION</u>
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FATHER OR GUARDIAN

NAME: 

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AGE: 

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HOME ADDRESS: 

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MOTHER

NAME: 

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AGE: 

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HOME ADDRESS: 

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NAME OF BANK WHERE YOU HAVE AN ACCOUNT:

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GROSS INCOME OF FAMILY UNIT:

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Salary or Retirement Benefits:

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Stocks:

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Interest:

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Other:

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MEMBERS OF FAMILY AND AGE:

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OTHER SCHOLARSHIPS OR GRANTS AWARDED TO YOU:

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**CERTIFICATION THAT THE ABOVE INFORMATION IS CORRECT**

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Signature of Parent or Guardian

\_\_\_\_\_  
Signature of Applicant