



New Jersey Institute for Continuing Legal Education Scholarship Application Form

CONFIDENTIAL: This information is solely for the use of the NJICLE Scholarship Administrator: NO further distribution or publication is permitted except: (1) as necessary to administer the scholarship program, and (2) as required by auditors of NJICLE.

NOTE: Application must be received by NJICLE no later than 10 days before the seminar.

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Date admitted to the practice of law: _____ Compliance Deadline: _____

Member of the NJSBA Yes No

SEMINAR 1

Seminar for which tuition assistance is requested: Seminar No. _____

Seminar Title: _____ Credit Hours: _____

Date: _____ Location (city): _____

SEMINAR 2

Seminar for which tuition assistance is requested: Seminar No. _____

Seminar Title: _____ Credit Hours: _____

Date: _____ Location (city): _____

Certification of financial need:

Are you attending the meet your current NJ MCLE requirements: Yes No

What is your annual income: \$0 to \$35,000 \$35,000 to \$50,000 \$50,000 or more

(Please note: This question **MUST** be answered)

Please explain your financial need: _____

Have you received an NJICLE scholarship during your current compliance year: Yes No

I certify that the foregoing information about my total household income and financial need is accurate. I understand that if any of the financial information provided is false, I am subject to any resulting consequences.

Signature: _____ Date: _____

OFFICE USE ONLY:

Scholarship Granted: F P N _____

Tuition \$ _____ Date received: _____ Payment received: Y N

Minimum fee \$ _____

CLE Credit fee \$ _____ Owes: _____ Balance due (if any): _____ Balance paid: _____

Misc. fee \$ _____

Scholarship amt \$ _____ Scholarship Number: _____ Date notified: _____

**RETURN TO: NJICLE Scholarship Administrator, Attn: Eileen O'Connor
One Constitution Square, New Brunswick, NJ 08901
Email: eoconnor@njsba.com | Fax: (732) 249-1428**