LAW LIBRARIANS OF NEW ENGLAND

SCHOLARSHIP APPLICATION TO ATTEND AALL ANNUAL MEETING OR INSTITUTE

Please Type or Print Clearly 1. Name Date 2. Address: _____ Phone: _____ 3. For what purpose will you use this scholarship? 4. Are you a member of LLNE? ______ If yes, when did you join? _____ Please list membership on LLNE committees: (past & current) 5. Are you a member of AALL? ______ If yes, when did you join? ______ 6. Have you attended LLNE meetings? ______ What years? _____ 7. Have you attended AALL meetings or institutes? _____ What years? _____ 8. Have you received a LLNE scholarship before? If yes, please state year and amount. 9. Will your employer pay any of your expenses to attend this meeting? ______ If yes, please indicate amount. ______ 10. Have you applied for or received other scholarship support to attend this meeting? Please supply details including amount awarded.

11. What are your estimated expenses for this mee	ting?
Registration	_
Travel	_
Per Diem	
12. List other professional activities:	
13. Law Library employment: (most recent first, place service)	ce of employment, job title, length of
(Applicant's Signature)	(Date)
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