Law Librarians of New England
Scholarship Application

LLNE members seeking financial support to attend conferences, workshops, and academic programs must complete this form. **All applications must be accompanied by a current resume**.

Please note that the Scholarship Committee reviews the applications; all funding is at the discretion of the LLNE Executive Board.

Please Type or Print Clearly

1. Name: _____

2. Date: _____

3. Address: _____

    _____

    _____

    _____

4. Phone: _____

5. Email: _____

6. Purpose of Scholarship (check one):

    ☐LLNE _____ (please specify)

    ☐AALL _____ (please specify)

    ☐Academic _____ (please specify)

    ☐Continuing Education _____(please specify)

Please attach a brochure or supply the link to the website for this meeting/conference/class.

7. Are you a member of LLNE? _____ If yes, when did you join? _____

8. Are you a member of AALL? _____ If yes, when did you join? _____

9. Have you received a scholarship from LLNE before? _____ If yes, for what purpose and what amount?
    _____

10. Will your employer pay any of your expenses to attend this meeting/class? _____ If yes, how much?
    _____

11. What are your estimated expenses for this meeting/class?

Registration: _____

Travel: _____

Meals: _____

Tuition: _____

Books & Supplies: _____

12. List your membership on LLNE committees (past and present):

_____

_____

_____

13. List other professional activities:

_____

_____

_____

14. What are your career goals and how will the conference/workshop/class further those goals?

_____

_____

_____

_____

_____

If I receive an LLNE Scholarship Award, and I cannot attend or my employer decides to pay all or a portion of my expenses, I shall return the award money (or a portion thereof) to the Chair of the LLNE Scholarship Committee.

_____   _____

(Applicant's Signature)   (Date)

Return to:

AnnaKatherine Wherren, Chair

Suffolk University School of Law

120 Tremont Street

Boston, MA 02108

awherren@suffolk.edu

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