American Board of Trial Advocates

**AMERICAN BOARD OF TRIAL ADVOCATES**
**SACRAMENTO VALLEY CHAPTER**

# SCHOLARSHIP APPLICATION

Please type all answers or print neatly in ink.

1. Name: _____
   First MI Last

2. Mailing Address: _____
   Number and Street

   City: _____, CA Zip Code: _____

3. Telephone Number: _____

4. E-mail Address: _____

5. Current Year of Law School: _____

6. Participation in Trial Advocacy or Mock Trials? (Y/N) _____

7. Please complete a short essay (no longer than one page) which addresses your interest in becoming a civil trial lawyer and attach it to this application form.

Signature of Applicant: _____

Signature of Law Professor or Dean who attests that the applicant has or will have completed first year studies by the end of August and is deserving of this scholarship: _____