THBA'S 2017 APPLICATION FOR THE "VICTORIA CRUZ-GARCIA LAW STUDENT SCHOLARSHIP"

(Deadline for Submission: 5 p.m. on October 27, 2017 to info@thba.org)

PERSONAL INFORMATION		
FULL NAME:		
Address:		
TELEPHONE NUMBER:		E-mail:
DATE OF BIRTH:	GENDER:	LAW SCHOOL:
FAMILY INFORMATION		
WERE YOU/ARE YOU THE FIRST LAW SCHOOL? Y/N	Γ PERSON IN YO	UR FAMILY TO ATTEND: COLLEGE? Y/N
FINANCIAL AID INFORMATIO	<u> </u>	
TOTAL LAW SCHOOL TUITION	FOR THE 2017-2	2018 ACADEMIC YEAR
TOTAL AMOUNT OF STUDENT I		D OR TO BE RECEIVED FOR THE 2017-2018 ACADEMIC
	*	Y SOURCE, RECEIVED OR TO BE RECEIVED FOR THE
		CE, RECEIVED OR TO BE RECEIVED FOR THE 2017-2018
CURRENT EMPLOYMENT (DES	CRIBE NATURE (OF WORK, POSITION, AND INCOME)
DO YOU HAVE CHILDREN OR O	THER DEPENDE	NTS YOU SUPPORT: Y/N HOW MANY?
SCHOLARSHIP COMMITTEE AWARI	E OF PLEASE INCLU	AL CIRCUMSTANCES THAT YOU WISH TO MAKE THE THBA JDE THAT INFORMATION IN YOUR ESSAY. IN ADDITION, PLEASE FIED ON THE FIRST PAGE OF THIS APPLICATION PACKET.
	<u>CERTIFICAT</u>	TION OF APPLICANT
Ι,		, CERTIFY THAT THE FOREGOING
INFORMATION IS TRUE, ACCUR	ATE, AND COMP	PLETE TO THE BEST OF MY KNOWLEDGE.
APPLICANT SIGNATURE		- DATE
AFFLICANI SIGNATURE		DAIE