



San Antonio Paralegal Association is accepting scholarship applications from **May 1, 2018 through June 8, 2018**. One grant for each of the following categories may be awarded at the **June 2018** SAPA CLE Luncheon:

1. Scholarship for half of the fee for a **professional certification exam** (CLA/CP and/or TBLS). NALA certification exam fee is \$250 for NALA Members and \$275 for non-members, therefore the award is up to half of the fee or **\$125 or \$137.50**; TBLS application fee is **\$75** and exam fee is **\$125**, therefore the award is up to half the fee or **\$100**
2. Scholarship for **paralegal training** to be used toward payment of tuition for classes to obtain a paralegal degree or certificate. Award up to **\$200.00**; and
3. Scholarship for cost of attendance of **five (5) SAPA CLE luncheons** of your choice, approximately **\$100** value.
4. Scholarship for **registration fee** to attend this year's Texas Advanced Paralegal Seminar (TAPS) in Addison, Texas; Dates: September 26-28, 2018. Registration is **\$325 for members** and **\$425 for non-members**. SAPA will award half of the registration fee or **\$162.50** for members and **\$212.50** for non-members.

Rules/Restrictions for Scholarship Applications:

- A. Applicant must be a current Voting, Associate, or Student member of SAPA.
- B. One application per applicant. Applicant may apply for scholarship in more than one category.
- C. Applicant must provide a written essay on a topic listed in Section VII of the application (two-pages, double-spaced)
- D. If applicant is applying for a paralegal training scholarship and is currently enrolled, a copy of applicant's current training/college program transcript is required. [Does not need to be a "certified" copy.]
- E. Applications postmarked after June 8, 2018 will not be considered.

Any application that does not meet these guidelines will not be considered. Awarding of any scholarship is at the discretion of the Scholarship Program Committee and Board of Directors.

Winners of scholarship categories 1) and 2) above must submit proof of certification exam or tuition registration fees in order to receive award disbursement. Funds must be used within **one year from the date the scholarship is awarded** or funds will be forfeited. Winners must also be a current member of the organization upon reimbursement.

Winner of scholarship category 3) will be issued vouchers for five (5) CLE luncheons. Vouchers must be **redeemed within one year from the date scholarship** is awarded.

2018 SCHOLARSHIP APPLICATION

I. SAPA Information

SAPA Membership Number: _____ Membership Level: _____

II. General Information:

Name:	_____
Address:	_____
City/State/Zip:	_____
Home Phone:	_____
Work Phone:	_____
Email:	_____

III. Scholarship Request: Please complete the section(s) applicable to the scholarship(s) for which you are applying.

A: Complete this section **only** if applying for professional certification exam or maintenance of designation costs. **[2-Page Essay Required. Refer to Section VII]**

Please circle the **one** item for which you are requesting scholarship monies:

Certification Exam Sitting Fee

Please circle the **one** exam/designation you intend to take/maintain with this award:

NALA Certified Legal Assistant/Certified Paralegal Exam (CLA/CP)

NFPA Paralegal Advanced Competency/Registered Paralegal Exam (PACE/RP)

Texas Board of Legal Specialization (TBLS) Exam

Date of Exam: _____

Sitting Fee: \$ _____

Maintenance Fee: \$ _____

B: Complete this section only if you are applying for the paralegal training scholarship, or costs for non-SAPA CLE. (Applicants currently enrolled must attach a copy of their current college/training program transcript—does not need to be a certified copy.) **[Two-Page Essay Required. Refer to Section VII]**

If applying for the paralegal training program scholarship, please circle your degree program of interest:

Associate Degree Bachelor's/Master's Degree Paralegal Certificate Non-SAPA CLE

If currently enrolled, please complete the following information:

College/Program Name:			
College/Program Address:			
Program Director:		Phone:	
Advisor:		Phone:	
Estimated Graduation Date:			
How long have you been in this program?			
Current Enrollment Status:	New Student	Part-Time	Full-Time Graduate

If applying for the non-SAPA CLA Scholarship, please list the area(s) of law for which you intend to seek CLE.

C: Complete this section only if applying for the scholarship for cost of attendance of five (5) SAPA CLE luncheons of your choice.

Have you previously attended SAPA Luncheons: Yes _____ No _____

Please write a short paragraph explaining why you feel SAPA luncheons are important and why/how you could benefit from the scholarship:

D: Complete this section only if applying for the scholarship for registration cost to attend this year's TAPS.

Have you previously attended TAPS before: Yes _____ No _____

Please write a short paragraph explaining why you feel attending TAPS this year will benefit you with your current employment as a paralegal:

IV. Work History:

Please provide the name, address, and phone number of your current employer and supervisor:

Please briefly describe your current and past legal work experience:

V. Education History/Certifications:

If you have attended college or have a certification, please provide the following information:

College Name and Location	Degree(s)/Certificates	Date Completed

VI. Activities:

List all club memberships, including professional, school, civic, community service, honorary, and fraternal organizations:

Please list all volunteer work:

List all hobbies, talents or interests:

VII. Essay:

Submit a typed, double-spaced, two-page essay on one of the following topics. ***Applications submitted without an essay will not be considered.***

- Why Continuing Legal Education or Professional Certification is important for the paralegal profession
- Why being a SAPA member is important to me
- Why ethics is an essential role in the paralegal career
- Why I chose to pursue the paralegal profession

VIII. Authorization and Certification:

Should you receive this award, your picture may be published in our newsletter and/or on the website in an effort to promote this scholarship.

If this is ***not*** acceptable, please initial here: _____

I, _____, hereby authorize the Scholarship Program Committee to contact my employer or school, if necessary, for additional information for the Scholarship Program Application. I have read and understand the attached Scholarship Program Criteria. I understand that all applications will be reviewed by the Scholarship Program Committee. I certify that the above information is true and correct and that in compliance with the attached Scholarship Criteria.

I am submitting with this application the appropriate supporting documents, including the written essay as required by Section VII.

Signature of Applicant

Date

Mail completed application, supporting documents and essay to:

**Scholarship Program Committee - SAPA
P.O. Box 90037
San Antonio, Texas 78209**

DEADLINE: Friday, June 8, 2018