



SOUTHWEST FLORIDA PARALEGAL ASSOCIATION, INC.

Post Office Box 2094, Sarasota, Florida 34230-2094

swfloridaparalegals.com

An Affiliate of the National Association of Legal Assistants, Inc.

INFORMATION – \$300.00 STUDENT SCHOLARSHIP

Southwest Florida Paralegal Association, Inc. "SWFPA" encourages paralegal students, including its student members, to complete their paralegal education and attain the distinction of Certified Legal Assistant (CLA). In order to help with the cost of taking the required paralegal courses, SWFPA offers a \$300.00 student scholarship each year to a qualified applicant. The following rules apply to applicants for the \$300.00 student scholarship:

Rules for Student Scholarship Applicants

1. The applicant must be enrolled in a paralegal program at an accredited school of advanced education and have at least a 3.5 GPA. A certified copy of the applicant's transcript must accompany the application.
2. The essay portion of the application must be legible (preferably typed and double-spaced). It will be judged on originality, writing clarity, and content.
3. The two (2) letters of recommendation that accompany the application **MUST** include one (1) letter from an instructor at the school where the applicant is currently enrolled and one (1) letter from a present or former employer or another personal reference, excluding relatives.
4. The application must be accompanied by a \$10.00 application fee payable to Southwest Florida Paralegal Association, Inc. **This fee will be waived for student members of SWFPA.** If you are not a student member, each applicant who submits a fully completed application will receive a free one (1) year membership to SWFPA.
5. The applicant must submit the scholarship application, with the required enclosures, no later than October 31st of the current year to the Scholarship Committee, Southwest Florida Paralegal Association, Inc., Post Office Box 2094, Sarasota, Florida 34230-2094. Applications received after the deadline or which lack the required enclosures will not be considered.

The recipient of the \$300.00 student scholarship award will be selected by the SWFPA Scholarship Committee and approved by the SWFPA Board of Directors. **The name of the recipient will be announced at SWFPA's annual meeting.** With the recipient's permission, the winning essay may be published in the SWFPA newsletter, *Writ of Assistants*, and/or a NALA publication.

There are no restrictions on the number of students who may apply from the same school. Scholarship awards are paid directly to the educational institution of the recipient's choice during the spring or next school term.



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APPLICATION FOR \$300.00 STUDENT SCHOLARSHIP

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

SSN: _____ Date of Birth: _____

Dependents (*Names and Ages*): _____

Home Phone: _____

Home Fax Number: _____

Home E-Mail: _____

Work Phone: _____

Work Fax Number: _____

Work E-Mail: _____

School: _____

Graduation Date: _____

SWFPA Member: Yes No

Education:

(List all schools that you have attended since High School. Please list schools in chronological order and include information on the degrees and/or certificates earned)

Name/Address of School Years attended Degree/Cert.

Name/Address of School Years attended Degree/Cert.

References:

(List the names, addresses, and telephone numbers of the referenced attached)

Program Instructor Address Telephone

Employer or Personal Reference Address Telephone

Essay: On a separate sheet of paper, in 300 words or less, explain why you want to become a paralegal, what professional goals you have set for yourself after graduation, and where you see the paralegal profession in 20 years. Your essay must be legibly printed or typed (preferably typed and double-spaced). It will be judged for clarity, originality, and content.

Terms of Scholarship: By signing this application, I am attesting to its accuracy and granting permission to SWFPA to verify the accuracy of the information provided above. I also understand that SWFPA may ask for permission to publish my essay in its newsletter, *Writ of Assistants* and/or a NALA publication.

Signature: _____

Date: _____