Charleston School of Law Foundation Inc.

Temporary Bar Exam Emergency Assistance Application

In furtherance of its charitable purposes, the Charleston School of Law Foundation, Inc. ("Foundation") operates a Temporary Bar Exam Emergency Assistance Fund ("Temporary Bar Fund") designed to help certified graduates of the Charleston School of Law who are facing unexpected and desperate financial events. The Fund may provide short-term financial assistance for essential needs including housing, food, and medical care when the criteria established by the Foundation are met.

To apply, please complete the following application and submit it <u>Awards@charlestonschooloflawfoundation.org</u>.

You will be notified by email if you have been selected as a recipient of a scholarship or grant.

Personal Information		
Full Name:		
Current Address:		
City: State: Zip Code:		
Home Phone:		
Work Phone:		
Student ID:	Preferred Contact Metho	od:
Estimated Date of Graduation (I	MM/YYYY):	
Applicant Request:		
I would like to request \$	from the	Fund.
If applicable, please attach supp	orting documentation reques	sted by the notice to apply.
Needs Assessment:		
Please explain in detail why you	fit the criteria of this Schol	arship Fund and how these
funds will contribute to your leg	al education. You may use a	additional pages if necessary.

Please describe the assistance you are seeking from the Charleston School of Law Foundation. Can you justify the amount you request as it relates to your tuition funding?

Please provide any additional information you would like the Awards Committee to consider.

Please state whether you have a family relationship with any directors, employees or key contributors to the Charleston School of Law Foundation, and if such relationship does exist, please provide the details. This question requires an answer.

The Foundation is strictly prohibited from granting funds to benefit a director, officer, key contributor, or employee of the Foundation, as well as individuals that have a family or business relationship with these individuals. A family relationship shall include: spouse, sibling, ancestor, child, grandchild, great-grandchildren, and the spouse of siblings, children, grandchildren, and great-grandchildren.

I, the undersigned, verify and attest that and that the foregoing information is accurate and complete as of the following date.

Signature

Date Charleston, SC