

SNELLA SCHOLARSHIP APPLICATION FORM FOR AALL Annual Meeting

Applicant Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Home Phone: () _____ Work Number: _____

Email Address: _____

Additional Information

Purpose of the Scholarship (Please provide the name of the program and date):

Are you a member of SNELLA? ___ Yes ___ No
If Yes, when did you join? _____

Have you received a SNELLA scholarship before? ___ Yes ___ No
If yes, amount and date received:

Please list if you have ever been an officer, board member, committee chairman, member, speaker, or had member activity in a library/professional association:

Present Employment and length of time:

Will your employer pay any of your expenses in attending this meeting? ___ Yes ___ No
If yes, what portion?

Estimated expenses for this meeting:
Registration:
Travel:
Lodging:
Per Diem:

Please tell us how you will benefit from attendance at this meeting?

Please describe your interest in law libraries and law librarianship in a 400-500 word essay below :

If I receive a SNELLA award, and if for any reason I cannot attend (or my employers decides to pay all or a portion of my expenses), I shall return the award money (or the unused portion thereof) to the Chair of the SNELLA Scholarship Committee.

Applicant's Signature:

Date:

Please return completed application via mail or email to Camilla Tubbs by April 15th

Camilla Tubbs
Yale Law Library
127 Wall Street,
New Haven, CT 06511
Email: camilla.tubbs@yale.edu