Hispanic Bar Association of Orange County
2018-2019 Wally Davis Scholarship Application Form

The Program
This fund is sponsored by the Hispanic Bar Association and awards scholarships to Orange County Latino law students. The Fund was named in memory of Wally Davis, one of the first Latino attorneys in Orange County who fought for the civil rights of all Latinos.

Eligibility
Eligible students must be current 1- or 2-L law students of Latino origin and involved in the Latino community. Priority will be given to students with significant ties to Orange County. Scholarships are open to students regardless of immigration status.

Available Scholarship
- A maximum of five (5) scholarships will be awarded and a maximum of $25,000.00 will be distributed among the scholarship winners.

Application Requirements
To be considered for a scholarship, you must:
- Complete and sign the 4-page application
- Include personal statement as specified in the application
- Attach a resume (include relevant community involvement and legal work)
- Submit 2 letters of recommendation
- Attach a copy of your undergraduate school or law school transcripts
- Attach a copy of the first two pages of your/your parents most recent U.S. Income Tax Return
- All materials must be postmarked by Friday, October 26, 2018. Sign completed form and mail to:
  Hispanic Bar Association
  P.O. Box 6130
  Newport Beach, CA 92658
  Attn: Scholarship
  You may also email your application to: info@ochba.org

Incomplete or late applications will not be considered!

Applications will be reviewed by the HBA Scholarship Committee. Please note the following dates:
October 26, 2018: Application deadline. All materials must be postmarked by this date.
December 21, 2018: Notification of scholarship awards will be mailed by this date.
The Orange County Hispanic Education Endowment Fund
OCHBA Wally Davis Scholarship Application

Applicant’s Personal Information

Last Name ____________________________ First Name ____________________________ Middle _________

Address ___________________________________ Apt. ____________________________ Phone Number ____________________________

City ____________________________ State ____________________________ Zip ____________________________ Date of Birth ____________________________

E-mail Address ____________________________

Marital Status: □ Married □ Widowed □ Single □ Separated □ Divorced

I am of Latino descent through my: □ Father □ Mother □ Grandfather □ Grandmother who is (are) descendants of: ____________________________.

Your Occupation ____________________________ Occupation of Spouse (if applicable) ____________________________

Occupation of Father ____________________________ Occupation of Mother ____________________________

What are your parents’ highest levels of formal education? Enter in the box for: □ Mother: □ Father:  
1. No High School  2. Some High School  3. High School Graduate  4. Some College  5. 2-Year College Graduate  6. 4-Year College Graduate  7. Postgraduate

Are you a member of the Hispanic Bar Association of Orange County? □ Yes □ No

Are you the recipient of any immigration benefit (DACA, U-Visa, etc.) □ Yes □ No

Are you bilingual (Spanish/English)? □ Yes □ No

Applicant’s School Information

High School Attended ____________________________ City/State: ____________________________
G.P.A. ____________________________

Undergraduate School Attended ____________________________ City/State: ____________________________
G.P.A. ____________________________

Law School Currently Attending ____________________________ City/State: ____________________________
G.P.A. ____________________________ Graduation Date: ____________________________
Legal Area of Interest: ____________________________ Cumulative GPA: ____________________________
LSAT score ____________________________ Law School Student Ranking: ____________________________
Extracurricular Activities

List any and all volunteer and community service activities in which you have participated. For each activity, estimate and enter the approximate number of hours you spent on the activity each year. Attach a separate sheet if necessary.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description of activity (note any leadership roles)</th>
<th>From</th>
<th>To</th>
<th>Hours per week</th>
</tr>
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Financial Information

Under federal regulations, you are considered a dependent student if you are under 24 years unless you are a graduate student; are married or have dependents other than a spouse; are an orphan/ward of the court; or are a veteran of the U.S. armed services.

If dependent, please provide parents’ 2017 total annual income (taxed and untaxed). If independent, please provide the total annual income (taxed and untaxed) for you (and your spouse if married). Attach a copy of the first two (2) pages of the 2017 U.S. Income Tax Return to this application.

Enter the total number of members living in your household: _______________________________________________________

Enter the ages of members in your household: _______________________________________________________________

Please state your outstanding accumulated educational debt: ___________________________________________________

Please provide a copy of your financial aid summary provided by your school. For example, a FAFSA.

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<th>Student</th>
<th>Parents</th>
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<tbody>
<tr>
<td>1. Income earned in the past 12 months</td>
<td>$ _________</td>
<td>$ _________</td>
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<td>2. Expected contribution to your education</td>
<td>$ _________</td>
<td>$ _________</td>
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<tr>
<td>3. Total number of scholarships/grants for next school year</td>
<td>$ _________</td>
<td>$ _________</td>
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<td>4. Other Income sources __________________________</td>
<td>Self $ _________</td>
<td>$ _________</td>
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<td>Spouse $ _________</td>
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Anticipated Costs for 2018-2019 school year:
Tuition _____ Room & Board _____ Books_______ Other(specify) _______________

Other Scholarships/Financial Aid You Have Received for 2018 and 2019

Please indicate any scholarships or sources of financial aid you have been awarded, and the amount of each

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**Applicant Statement**

On an attached sheet (typed and double-spaced), please address the following points in a maximum of 900 words:

1. Academic plans and career goals
2. One compelling issue facing the Latino community today
3. What motivated you to go to law school
4. How your legal education will enable you to contribute/give back to the Latino community
5. Any special family or personal circumstances which have affected your achievement in school, work, or your participation in school or community activities (if applicable).

**Certification**

In submitting this application, I certify that the information provided in my application is complete and accurate to the best of my knowledge. I understand that the HBA may require me to provide documentation to corroborate the above information in order to be considered for this scholarship process. I further understand that any discrepancy in my information may result in disqualification from this scholarship process and termination of any scholarship awarded.

Applicant’s Signature ___________________________________________ Date ______________

Mail to: Hispanic Bar Association of Orange County
P.O. Box 6130
Newport Beach, CA 92658

Phone: 949-440-6700 x 253 Website: www.ochba.org Email: info@ocbha.org Tel. 949.760.0204

_The Wally Davis Scholarship is Available to All Student Regardless of Immigration Status._ Other scholarships available through the Orange County Community Foundation may be obtained at [www.oc-cf.org](http://www.oc-cf.org).

_More information_ on the Hispanic Education Endowment Fund (HEEF), can be obtained at [www.heef.org](http://www.heef.org).

_Incomplete or late applications will not be considered!_