October 25, 2018

To: Student Counselor and Staff:

Re: Student Scholarship Opportunity for 2019-2020 Academic Year

Wichita Legal Professionals (WLP), a Chapter of the Kansas Legal Professionals, Inc. (KLPI), is offering three $250 scholarships for the academic year 2019-2020 to students who are interested in pursuing a career in the legal field or law-related business career.

We would appreciate it if you would advise your students of this scholarship opportunity and provide the enclosed rules and application to any of your students who are interested. The winners of the scholarships will be notified prior to the academic year 2019-2020.

The applicants must carefully observe the eligibility requirements and submit the completed application by 5:00 p.m. on or before Thursday, January 31, 2019. Any application that is received without all of the requirements being met, or is received later than the deadline, will be automatically disqualified.

If you have any questions, please write or call me at the address or phone number listed below.

Sincerely,

Debbie Walton
Scholarship Chair
(316) 660-6278
dwalton@hinklaw.com

Enclosures

cc: Sheri Gravenmier, President
WICHITA LEGAL PROFESSIONALS
SCHOLARSHIP AWARD

Wichita Legal Professionals ("WLP"), shall award three $250 scholarships on the basis of scholastic achievements, future career goals, demonstration of financial need, and leadership ability. Applications should be printed or typed and submitted to the WLP Scholarship Chairperson no later than January 31, 2019.* Copies of this application may be machine reproduced.

Eligibility Requirements:

(a) Be a citizen of the United States;
(b) Be a resident of Kansas;
(c) Be a (i) high school senior, or (ii) a high school graduate (or received a GED);
(d) Plan to enroll or are enrolled in a school of advanced education; and
(e) Document financial need.

Instructions: Attach to all copies of this completed application the following:

1. Official high school transcript (or a GED certificate) and any college transcript. If applying as a non-traditional/returning adult student, please provide a Letter of Acceptance or Verification of Enrollment from the advanced education facility.

2. Two (2) one-page letters of recommendation from someone other than a WLP member or a member of applicant’s family. Letters must be signed and should include the following information:

   (a) Author’s relationship to the applicant.
   (b) Applicant’s activity and leadership record in school and/or community.
   (c) Description of applicant’s character, personality, initiative and work skills.
   (d) Applicant’s financial need and home background.

3. A one-page autobiographical statement in narrative form prepared by the applicant, which should include the following:

   (a) Applicant’s school activities (honors, clubs, etc.), family background and hobbies.
   (b) Applicant’s goals with respect to a career in his/her major of study, including information pertaining to employment held, classes taken, etc., to help achieve applicant’s goals and why applicant desires further education and training.
   (c) Applicant’s significant accomplishments, activities and experiences to date, including any honors, recognitions, awards, community activities, or positions of responsibility or importance to applicant.

The careful and detailed completion of this Application is very important. The answers to the questions on the following pages of the Application, and attachments hereto, will be kept in strict confidence.

*SIGN AND SUBMIT the completed Application by January 31, 2019, to: Debbie Walton, WLP Scholarship Chairperson, 1617 N. Waterfront Parkway, Suite 400, Wichita, KS 67206 or via email at dwalton@hinklaw.com.
**SCHOLARSHIP APPLICATION**

**BIOGRAPHICAL DATA**

Name: __________________________  Last  First  Middle  

Address: ________________________  Number  Street  City  ZIP Code  

Phone: __________________________  Day (include area code)  Evening (include area code)  

Birthdate: ________________________  Month/Day/Year  

Current Employer: __________________________  

Address: ________________________  Number  Street  City  ZIP Code  

Years Employed: ______________  Hours Worked Per Week: ________  

Marital Status (single/married/separated/divorced/widowed): ________________  

If Married and/or Have Dependents:  

Spouse's Full Name: __________________________  Last  First  Middle  

Spouse's Occupation: __________________________  

Children's Names and Ages: __________________________  

If Single and Dependent on Parents:  

Parents' Full Names: __________________________  

Parents' Occupation: __________________________  

Siblings' Names and Ages: __________________________  

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EDUCATIONAL DATA

Institution to be attended for period financial assistance is needed:

Name: ____________________________________________

Address: ____________________________________________

Number  Street  City  State  ZIP Code

Proposed Major of Study: ____________________________________________

Are you a member of Wichita Legal Professionals/Kansas Legal Professionals, Inc.?

Yes ___  No ___

FINANCIAL DATA

During the school year for which scholarship assistance is requested, Applicant will:

___ Reside with parents  ___ Reside in college housing

___ Reside with spouse and/or children  ___ Maintain separate household

List school expenses known or estimated in the school year for which this application is made:

Tuition  $_________  Travel expenses  $_________

Books/Supplies  $_________  Room/Board  $_________

Total known or estimated expenses: _______________________________________

List known or estimated income projected for school purposes in the school year for which this application is made:

From immediate family (spouse or parents)  $_________

From other relatives and friends  $_________

From personal loans  $_________

From own employment  $_________

Other scholarships, grants, etc.  $_________

Total known or estimated income  $_________
Applicant's Financial Status:

Applicant's net income for past tax year $________________
Spouse's net income for past tax year (if applicable) $________________
Parents' net income for past tax year (if applicable) $________________

VERIFICATION

I certify that to the best of my knowledge and belief, the information contained in this application is true, complete, and accurate.

Dated: ___________________________  Dated: ___________________________

Signature of Applicant  Signature of Applicant's Parent or Guardian if a Minor

Sponsored by Wichita Legal Professionals, a local chapter of Kansas Legal Professionals, Inc.