



NEW YORK STATE BAR ASSOCIATION

Trial Academy Scholarship Application: General Practice Section

Scholarship Applicant's Name: _____

Address: _____

Telephone: _____ Email Address: _____

Current Employer: _____

Year Admitted to New York State Courts: _____

Type of Practice: _____

How would the nominee benefit from attending the Trial Academy?

What benefit would the nominee offer to the Trial Academy and the other attendees?

Submitted by: _____

Address: _____

Telephone: _____ Email Address: _____

Scholarship eligibility is open to current NYSBA General Practice Section members (www.nysba.org/GP). Restrictions on gifts to public officials may apply. In addition to your completed application, a resume is REQUIRED. Please email this application and resume to: **Stephanie Bugos** at **sbugos@nysba.org**. **Deadline for submissions is 3/1/2018.**