



Los Angeles County  
ITALIAN AMERICAN LAWYERS ASSOCIATION  
proudly offers its

**\$3,000.00**  
**ANNUAL SCHOLARSHIP**

THE SCHOLARSHIP WINNER WILL BE HONORED AT OUR MEETING  
WITH THE CALIFORNIA SUPREME COURT

APPLICATIONS MUST BE  
RECEIVED BY OCTOBER 31, 2017

FOR FURTHER DETAILS AND  
AN APPLICATION, PLEASE CONTACT  
YOUR FINANCIAL AID ADVISOR  
OR:

ITALIAN AMERICAN LAWYERS ASSOCIATION  
c/o J. Sheldon Capeloto, Esq.  
99 South Lake Avenue, Suite 501  
Pasadena, California 91101  
Tel. (626) 793-7788  
Fax. (626) 793-1013  
jcapeloto@capelotolaw.com

The Italian-American Lawyers Association is fully certified by the State Bar of California and represented in the Federated Italo-Americans of Southern California. It was founded to foster a spirit of friendship amongst lawyers interested in the Italian heritage and to encourage personal and professional relationships amongst its members; to continue and improve the legal education and to render mutual aid and assistance to its members and the community through improvement of the practice of law, and to participate in civic and community affairs so as to ensure the proper administration of justice.

# ITALIAN AMERICAN LAWYERS ASSOCIATION

## LOS ANGELES COUNTY

### SCHOLARSHIP APPLICATION

DATE:

How did you hear about this opportunity? (Check one)

- Your law school  
 IALA Website  
 IALA Meeting  
 Word of mouth  
 Other \_\_\_\_\_

When completed, return to:

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Pasadena, California 91101  
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Please answer all questions as completely as possible. In the event that the space given in this application is insufficient for your response, please continue your answers on a separate sheet of paper. The scholarship will be awarded on academic achievement, potential contribution to the Italian-American Community and financial need. The selection will be made based upon the quality of applicants received each year. All information received by the Association will be verified to the extent possible, i.e., with the law school registrar. A transcript will be most valuable to the evaluation committee. You may also be asked to attend a personal interview. The scholarship winner will be honored at our meeting with the California Supreme Court. ALL APPLICATIONS MUST BE RECEIVED BY OCTOBER 31, 2017.

**1. Name:**

LAST	FIRST	MIDDLE

**2. Permanent Address:**

STREET	CITY	ZIP CODE

**3. Mailing Address:**

STREET	CITY	ZIP CODE

**4. Name of Law School:**

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**5. Law School Address:**

STREET	CITY, STATE	ZIP CODE

**6. Telephone / Email Address:**

DAY PHONE #	EVENING PHONE #	EMAIL ADDRESS

**7. Type of program** (check one):  day  night

**8. Year — Day Program** (check one):  first  second  third

**9. Year — Night Program** (check one):  first  second  third  fourth

**10. Anticipated date of graduation:**

MONTH	YEAR

**11. Marital status** (check one):  married  single  other

**12. Spouse's name:**

LAST	FIRST	MIDDLE

**13. Spouse's occupation:**

**14. No. of Children:**  Ages:

**15. Date and Place of birth:**

**16. Academic Background:**

School	Degree Rec'd/Date	GPA

**17. Subjects taken to date** (if no transcript is available)

Subject	Grade

Law School GPA  Official Class standing

**18. List any professional or academic honors, awards, activities, or memberships:**

(Box will expand as you type)

**19. List any scholarships or fellowships received during law school and state the nature of each:**

**20. If presently employed, state:**

NAME OF EMPLOYER

<input type="text"/>	<input type="text"/>
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ADDRESS

TELEPHONE NUMBER

JOB DUTIES

Av. # of hours worked per week  Average gross monthly \$   
income:

**21. List and describe any extracurricular activities you have been involved with, both prior and during law school:**

**22. List name, address and telephone number of someone who will always know your current address and telephone number:**

NAME

<input type="text"/>	<input type="text"/>
----------------------	----------------------

ADDRESS

TELEPHONE NUMBER

**23. In what locale do you intend to practice law?**

**24. What should the purpose and goals of the Italian American Lawyers be?**

**25. How do you see yourself as an Italian American?**

**26. State the reasons you should be awarded the scholarship:**

I hereby certify that all of my statements and answers set forth in this application are true and correct.

Dated: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

I hereby authorize the Scholarship Committee of the Italian American Lawyers Association to request and to receive my law school transcript.

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SIGNATURE

DATE