

CLE HARDSHIP APPLICATION FORM

Tuition assistance will be extended to those attorneys who either are unemployed or employed in the public sector and who can establish financial hardship. Attorneys who meet these criteria will be granted a credit of up to 50% of the applicable course registration fee. Applications and resume must be received no later than two weeks prior to the program to be eligible for consideration. Please send your completed application along with your resume to:

Fordham University School of Law
Office of Public Programming
150 West 62nd Street
New York, NY 10023

Part I - Applicant Information

Name _____

Firm _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____

Male Female

Number of years that you have been licensed to practice _____

Are you a Fordham Law School Alum? No Yes What year did you graduate? _____

Will your attendance at this course be applied towards required MCLE credit?

No Yes If yes, please indicate state(s) _____

Part II - Employment Status *(attach resume and check appropriate status)*

Employee of a Corporation *(list company/your title)* _____

Full-Time Employee of a Not-for-Profit Organization *(list organization)* _____

Law Student *(List school and year)* _____

Local, State or Federal Government Staff Attorney *(list agency)* _____

Employee of a Law Firm *(list name of firm, # of attorneys, your title)* _____

Public Interest Lawyer *(list organization)* _____

Solo Practitioner

Unemployed

Part III - Annual Income

Income Less Than \$15,000

Income Between \$15,000 and \$30,000

Income Above \$30,000

Part III

1. Course applied for _____

2. Course Date(s) _____

3. Lowest advertised tuition applicable to you _____

4. Statement of relevance of course to your practice:

5. Please explain your need for tuition assistance:

6. Highest tuition you can afford to pay: \$ _____

Note: Due to high demand for tuition assistance, a maximum of two tuition assistance requests may be approved for any one applicant during any one four-month CLE session.

FOR OFFICE USE:

Date Received _____

Application Number _____

Assistance Granted \$ _____

Tuition Due \$ _____

Reviewed by: _____

Date: _____

Approved by _____

Date: _____