Hispanic Bar Association of Orange County
2022 Bar Stipend Application Form

The Program
This fund is sponsored by the O. C. Hispanic Bar Association and awards stipends to Orange County law students with strong Latinx ties. Recipients are honored and expected to be present at our annual gala to be held next year on March 2022 at the Irvine Marriott.

Eligibility
Eligible bar takers must be 3-L law students or registrants of the February 2022 California Bar Exam and of Latino origin and involved in the Latino community. Priority will be given to bar takers with significant ties to Orange County. Stipends are open to bar takers regardless of immigration status. The OCHBA requests your authorization to print and display portions of your personal statement and picture in our program and at our Gala for the purpose of raising scholarship and stipend funds for future years.

Available Scholarship
A maximum of one – two (1-2) stipend awards will be given and a maximum of $1,500.00 will be distributed among the scholarship winners.

Application Requirements
To be considered for an award, you must:
• Complete and sign the 3-page application
• Include personal statement as specified in the application
• Attach a resume (include relevant community involvement and legal work)
• Proof/receipt of registration for the February 2022 California Bar Exam
• Letter(s) of recommendation are optional

All materials must be postmarked by Friday, October 22, 2021. Sign completed form and mail to:

Hispanic Bar Association
P.O. Box 6130 Newport Beach, CA 92658
Attn: Bar Stipend

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 22, 2021: Application deadline. All materials must be postmarked by this date.

December 2021/January 2022: Notification of stipend recipients will be sent.
BAR EXAM STIPEND APPLICATION

Applicant’s Personal Information

Last Name First Name Middle

Address Apt. Phone Number

City State Zip Date of Birth

E-mail Address

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

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 Current/Attended _________________ City/State: __________________________
G.P.A. __________________________ Graduation Date: ____________________

Legal Area of Interest: __________________

Law School Student Ranking: __________

Registered Bar Exam Date: __________________

Date(s) Prior Exam Taken: __________________
On an attached sheet (typed and double-spaced), please address the following points in a maximum of 500 words:

1. Academic plans and career goals
2. Your ties to Orange County and/or the Latinx community
3. How your legal education will enable you to contribute/give back to the Latino community
4. Your financial need and how being awarded this stipend will assist you
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 __________________

Authorization

The OCHBA requests your authorization to print and display portions of your personal statement and picture in our program and at our Gala for the purpose of raising scholarship funds for future years.

I ______________________, authorize the Orange County Hispanic Bar Association to print and or display all or portions of my personal statement and likeness in the newsletter and/or at the OCHBA Scholarship Fundraising Gala on set for March 2022.

Date:__________________________

Signature

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@ochba.org Tel. 949.760.0204