

Please verify the following information:

First Name: First

Last Name: Last

Email Address: flast@name.org

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**\*1. Library/Law degrees/Other (Please describe other professional experience and include month and year)**

**\*2. How will this academy benefit you and your career as a Law Librarian?**

**\*3. Leadership and/or Service Record - describe the following:**

- 1) Your service in professional organizations;
- 2) Your leadership activities in the workplace; and
- 3) Your service and/or leadership in your community.

**Please be specific and list titles, dates and accomplishments in all three areas.**

**4. Optional: Please share any other information that may assist the review committee in making their selections.**

**\*5. If accepted into the program, you will be assigned a special mentor for the year. Please provide a brief description of the type of mentor you would like to have assigned.**

**\*6. Would you be willing to be put on a waiting list? (Please answer Yes or No)**

**\*7. Please upload a PDF copy of your recommendation (file name should include your name). The maximum file size for uploading is 10MB. If submitting more than one recommendation, please group them together and send them as a single .pdf file.**

**ADD FILE**

**CANCEL** **FINISH**