

AALL ANNUAL MEETING/WORKSHOP GRANT APPLICATION FOR STUDENT/NEW MEMBERS

Individuals eligible for the AALL Annual Meeting/Workshop Student/New Member Grant are

- Active Members with less than five years of AALL or AALL chapter membership, or
- Student Members of AALL or an AALL Chapter.

Preference is given to applicants who are active participants in the Association or one of its Chapters, and who may not be able to attend the Annual Meeting without financial assistance. Only Students or New Members who have not received and used an AALL grant in the past three years are eligible.

Applications for this Grant will be accepted at the Offices of the American Association of Law Libraries **on or before April 1, 2022**. Recipients of the Grant will be announced in May. Early submission of the application packet should make it possible to verify that the file is complete well before the deadline. **Incomplete or late applications will not be considered.**

APPLICATION MUST INCLUDE:

- A completed application.
- A personal statement in which you briefly describe how attending this particular Annual Meeting or Workshop will help you professionally; your level of involvement in library association (including SIS) or chapter activities; your financial need for the grant; and anything else you would like the Annual Meeting Grant Awards Jury to know about you.
- A current resume.
- Two letters of recommendation. These letters should address both your professional reasons for attending this particular meeting or workshop and your need for a grant. Additionally, the letters should comment on your contributions to AALL, to your local chapter, and to the field of law librarianship.

Recommendation 1: _____

Submitted with application Author is sending separately

Recommendation 2: _____

Submitted with application Author is sending separately

APPLICANT INFORMATION

I am applying for a grant to the: Choose an item.

Name: _____

Present Home Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Permanent Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Email:** _____

LIBRARY EMPLOYMENT HISTORY

Start with your current or most recent job position.

Full Time Part Time

Position Title: _____

Employer: _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Dates of Employment:** _____

Full Time Part Time

Position Title: _____

Employer: _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Dates of Employment:** _____

Full Time Part Time

Position Title: _____

Employer: _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Dates of Employment:** _____

Full Time Part Time

Position Title: _____

Employer: _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Dates of Employment:** _____

Full Time Part Time

Position Title: _____

Employer: _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Dates of Employment:** _____

EDUCATIONAL INFORMATION

Are you currently a student enrolled in a degree program to further your career in law librarianship?

Yes No

If yes, please complete the following.

Educational Institution: _____

Enrollment Date: _____

Graduation Date: _____

Course Work:

Please list specific classes taken to date.

AALL MEMBER INFORMATION

Are you a member or student member of AALL? Choose an item.

How long have you been a member of AALL? _____

Are you a member or student member of an AALL chapter? Choose an item.

If yes, which chapter(s) and when did you join:

AALL and/or chapter activities:

Please include dates of activities and meetings attended. Attach a separate sheet if necessary.

ADDITIONAL INFORMATION

- I have not applied for an AALL grant in the past.
- I previously applied for an AALL grant, but I was not awarded one.
- I was awarded an AALL grant, but I was unable to use it.
- I was awarded an AALL grant and I used it in: _____

SUBMISSION

- By checking this box, I attest the answers given on this grant application are accurate and complete.
- By checking this box, I attest that if I receive a grant for the AALL Annual Meeting/Workshop and for any reason I cannot attend, I shall immediately notify the chair of the AALL Annual Meeting Grant Awards Jury.

Today's Date: _____

If possible, submit all documents together to help ensure the application is complete by the deadline. Please save the application and email all documents to Heidi Letzmann at hletzmann@aall.org.