

NATIONAL JUDGES' EDUCATION & RESEARCH FOUNDATION

Scholarship Application

*****Please do NOT omit any information!*****

NAME: _____

TITLE: _____ COURT: _____

COURT

ADDRESS: _____
Street / PO Box City State Zip

TELEPHONE: () _____ EMAIL: _____

HOME ADDRESS: _____
Street / PO Box City State Zip

How long have you been a member of the National Judges Association?

Have you ever received a scholarship from the National Judges Education & Research Foundation?

() No () Yes When? _____

Are you on the bench () Full Time or () Part time _____ Hours per week

Court Information: Check all that apply.

- | | | |
|------------------------|---|---------------------------|
| () Special Court | () Limited or () General Jurisdiction | |
| () Justice Court | () Municipal Court | |
| () Civil Jurisdiction | () Criminal Jurisdiction | () Ordinance Enforcement |
| \$ _____ (Amt) | () Misdemeanors | () Felonies |
| () Juvenile | () Traffic | () Jury Trials |
| () Probate | | |

Population your Court serves _____ How many judges? _____

Purpose of Scholarship Application:

() Attend class at National Judicial College

Specific information (Class title, duration, dates, etc.)

() Other (Specify) _____

() Conference registration fee for NJA Annual Education Conference

What entity is your primary funding agency?

Address & Telephone Number: _____

To submit this application or ask questions, please contact your state director, a board trustee or the Treasurer.

Hon. Candace Hissong NJERF
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