

APPLICATION

2011 LACDL Camille F. Gravel, Jr. Scholarship

By applying for this scholarship, the recipient agrees to perform indigent defense service for at least one year from the conclusion of the NCDC session attended.

If you need additional space, attach extra sheets. Please print **legibly** or type.

First Name _____ **Last Name** _____

Firm _____

Address _____

City _____ **State** _____ **Zip** _____

Office Phone (____) _____ **Fax** (____) _____

Email address _____ **Preferred Session** **June 12-25, 2011**
 July 17-30, 2011

Type of Practice:

Public Defender **Contract Counsel** **Assigned Counsel** **Private Practice**

If not a public defender, briefly describe your practice and that of others in your office. Include an estimate of the number of appointed cases you handle each year.

Briefly explain why you want to attend the College.

