

**\*\*APPLICATIONS MUST BE RECEIVED NO LATER THAN MARCH 15, 2009\*\***

## SCHOLARSHIP APPLICATION 2009

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NAME: \_\_\_\_\_

COURT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY & ZIP: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_

COURT CLERK/ADMINISTRATOR FOR \_\_\_\_\_ YEARS/MONTHS

MEMBER OF MACA SINCE: \_\_\_\_\_

POPULATION: \_\_\_\_\_ 10,000 & UNDER \_\_\_\_\_ OVER 10,000

AMOUNT BUDGETED BY CITY FOR TRAVEL/EDUCATION FOR  
MUNCIPAL COURT EMPLOYEES: \$ \_\_\_\_\_

NUMBER OF COURT EMPLOYEES: \_\_\_\_\_

ARE ANY TRAVEL EXPENSES ASSUMED BY CLERK/ADMINISTRATOR  
REIMBURSED BY YOUR CITY: (circle one) YES NO

DOES YOUR COURT COLLECT \$1.00 FROM COURT COSTS FOR JUDICIAL  
EDUCATION FUND? (circle one) YES NO

IF YES, AMOUNT COLLECTED FOR \_\_\_\_\_ : \$ \_\_\_\_\_

\*\*\*\* Please attach a copy of your budget for the last fiscal year. \*\*\*\*

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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\*\*\* MACA USE ONLY\*\*\*

PAID: Check # \_\_\_\_\_ DATE: \_\_\_\_\_

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