

**2025 CLS Regional Retreats**

**Scholarship Request**

CLS is pleased to offer scholarship funds for “young lawyers” or “new lawyers” to attend any of the 2025 CLS Regional Retreats. Scholarships are based on need and actual expenses and will be awarded on a rolling basis until funds are depleted. Send applications and questions to: [attymin@clsnet.org](mailto:attymin@clsnet.org). For details on each retreat, visit our website: <https://www.christianlegalsociety.org/events/#upcoming_events>

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you currently a CLS member?** ☐ **Yes** ☐ **No**

**Link to join:** [**https://www.christianlegalsociety.org/join/**](https://www.christianlegalsociety.org/join/)

**Current Employer & Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Graduation Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Law School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Statement:** Please provide a short statement of your involvement with Christian Legal Society and a detailed financial need. If you are not currently involved in a CLS chapter, describe how the Regional Retreat will benefit you.

**Which regional retreat would you like to attend?**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (MW, NW, SW, NE, or SE)

**Grant requested:** ☐ Amount: (max $500) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*NOTE: Attendees will receive scholarship in the form of reimbursement at the retreat. Requesting the smaller amount will allow us to provide a response to you earlier and allow more people to receive scholarships.*

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_