# WILKIE D. FERGUSON, JR. BAR FOUNDATION SCHOLARSHIP APPLICATION

2021



WILKIE D. FERGUSON, JR. BAR FOUNDATION
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MIAMI, FLORIDA 33101-5487
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# WILKIE D. FERGUSON, JR. BAR FOUNDATION SCHOLARSHIP APPLICATION 2021 P.O. BOX 15487 MIAMI, FLORIDA 33101-5487

- 1. DEADLINE: Foundation scholarship applications must be received via email to <a href="mailto:info@wdfjba.org">info@wdfjba.org</a> by May 21, 2021 at 5:00 PM EST (no exceptions).
- 2. Refer to page six (6) of this application for a list of the supporting documents required to be submitted with the application. Incomplete applications will not be considered.
- 3. Type or print legibly. Illegible applications will not be considered.
- 4. If you are selected as a scholarship recipient you must be present at the Wilkie D. Ferguson, Jr. Bar Association Annual Scholarship and Awards Gala or Program at a location and on a date to be announced.

  Failure to attend the gala or program to accept the award in-person will result in forfeiture of the award.
- 5. If you have any questions about the application, please contact Nydia Streets at (305) 961-1136 or via email at <a href="mailto:nydia@streetslaw.com">nydia@streetslaw.com</a>.

## Wilkie D. Ferguson, Jr. Bar Foundation Scholarship Application 2021

| Pleas | e <b>type</b>                                                                                                                  | or <b>print</b> your answers. If application is illegib | ole it will no | ot be consid  | dered.           |               |                          |
|-------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|----------------|---------------|------------------|---------------|--------------------------|
| 1.    | Last Name: First Name:                                                                                                         |                                                         |                |               |                  |               |                          |
| 2.    | Mailing Address: Street:                                                                                                       |                                                         |                |               |                  |               |                          |
|       |                                                                                                                                | City: State: ZIP:                                       |                |               |                  |               |                          |
| 3.    | Davt                                                                                                                           | ime Telephone Number: ( )                               |                |               |                  |               |                          |
|       |                                                                                                                                |                                                         |                |               |                  |               |                          |
| 4.    | Even                                                                                                                           | ing Telephone Number: ( )                               |                |               |                  |               |                          |
| 5     | Emai                                                                                                                           | l Address:                                              |                |               |                  |               |                          |
| 6.    | Date of Birth: Month Day Year                                                                                                  |                                                         |                |               |                  |               |                          |
| 8.    | Law School:                                                                                                                    |                                                         |                |               |                  |               |                          |
| 9.    | Year                                                                                                                           | : 1L 2L 3L LLM                                          |                |               |                  |               |                          |
| 10.   | Full r                                                                                                                         | name, address, telephone number and e-mai               | l address o    | f financial a | id adviso        | r:            |                          |
|       |                                                                                                                                |                                                         |                |               |                  |               |                          |
|       |                                                                                                                                |                                                         |                |               |                  |               |                          |
|       |                                                                                                                                | (221) (2                                                |                |               |                  |               |                          |
| 11.   | Grade Point Average (GPA): (On a 4.0 scale)  Attach proof of GPA. Your most recent <b>official</b> school transcript required. |                                                         |                |               |                  |               |                          |
| 12.   | , 3                                                                                                                            |                                                         |                |               |                  |               |                          |
|       | Graduated                                                                                                                      |                                                         |                | uateu.        |                  |               |                          |
| 13.   | List t                                                                                                                         | he name of any college you have attended.               | Year           | Year          | Year             | Type of Degre |                          |
|       | Began                                                                                                                          |                                                         |                | Ended         | Graduated<br>(If |               | Received (If applicable) |
|       | A.                                                                                                                             |                                                         |                |               | applica          | ble)          |                          |
|       | В.                                                                                                                             |                                                         |                |               |                  |               |                          |
|       | C.                                                                                                                             |                                                         |                |               |                  |               |                          |
|       | D.                                                                                                                             |                                                         |                |               |                  |               |                          |
| 14.   | List e                                                                                                                         | expenses you expect to incur per semester or            | quarter:       |               |                  |               |                          |
|       | A.                                                                                                                             | Tuition: Amount: \$                                     |                |               |                  |               |                          |
|       | B.                                                                                                                             | Books: Amount: \$                                       |                |               |                  |               |                          |
|       | C.                                                                                                                             | Room & Board: Amount: \$                                |                |               |                  |               |                          |
|       | D.                                                                                                                             | Other expenses: Amount: \$ Describe under               | comments       | S             |                  |               |                          |
|       | m.                                                                                                                             | Other expenses: Amount: \$ "                            |                |               |                  |               |                          |
| Comm  | ents:                                                                                                                          |                                                         |                |               |                  |               |                          |
|       |                                                                                                                                |                                                         |                |               |                  |               |                          |
|       |                                                                                                                                |                                                         |                |               |                  |               |                          |
|       |                                                                                                                                |                                                         |                |               |                  |               |                          |
|       |                                                                                                                                |                                                         |                |               |                  |               |                          |

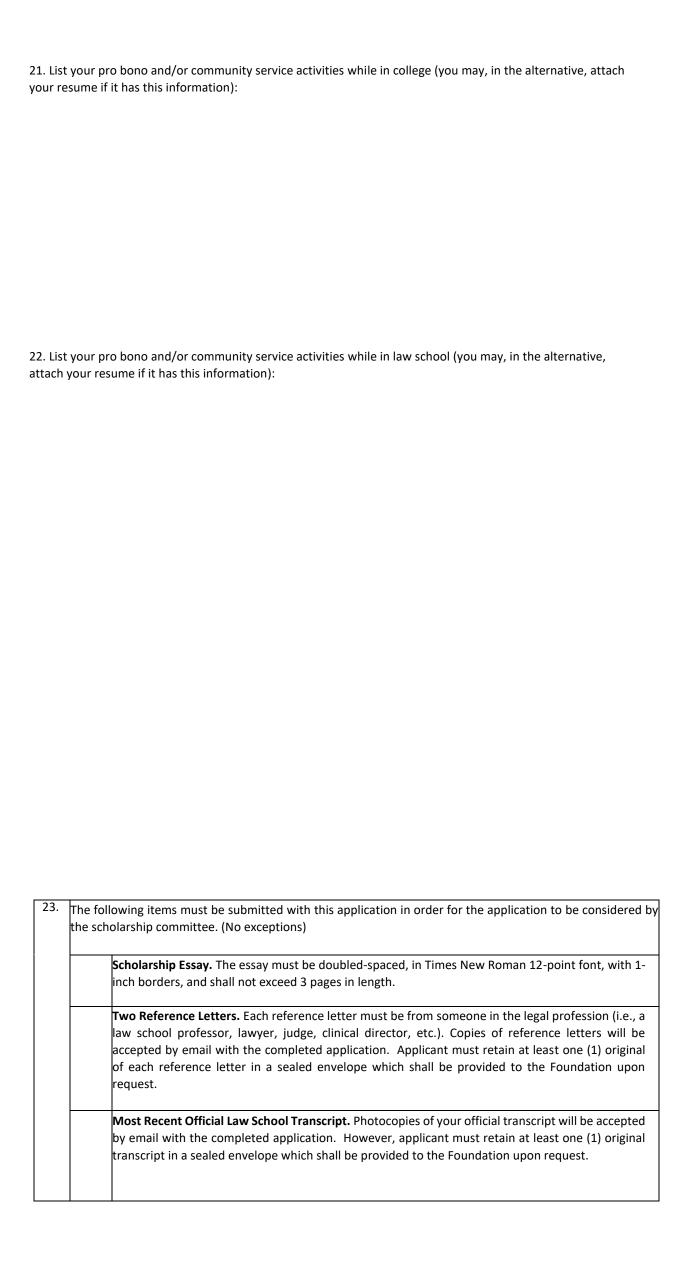
| 15.                                      | List other financial assistance you will receive per semester or quarter: |                                                          |  |
|------------------------------------------|---------------------------------------------------------------------------|----------------------------------------------------------|--|
|                                          |                                                                           |                                                          |  |
|                                          | A.                                                                        | Personal: Amount: \$                                     |  |
|                                          | B.                                                                        | Other Scholarship(s): Amount: \$ Describe under comments |  |
|                                          | C.                                                                        | Grants: Amount: \$                                       |  |
|                                          | C.                                                                        | Student Loan(s): Amount: \$                              |  |
| D. Other Financial Resources: Amount: \$ |                                                                           |                                                          |  |
| Comn                                     | nents:                                                                    |                                                          |  |
|                                          |                                                                           |                                                          |  |
|                                          |                                                                           |                                                          |  |
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|                                          |                                                                           |                                                          |  |

Use an additional sheet if needed to list financial information requested in items 13 & 14.

| 16. | What are | your educational | and | professional | goals and ob | jectives? |
|-----|----------|------------------|-----|--------------|--------------|-----------|
|-----|----------|------------------|-----|--------------|--------------|-----------|

17. List your honors, awards and achievements while in college (you may, in the alternative, attach your resume if it has this information):

| 18. List your honors, awards and achievements while in law school (you may, in the alternative, attach your resume if it has this information):                   |
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| 19. List your membership and participation in extracurricular activities in college (you may, in the alternative, attach your resume if it has this information): |
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| 20. List your membership and participation in extracurricular activities in law school (you may, in the                                                           |
| alternative, attach your resume if it has this information):                                                                                                      |
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| I certify that I am a member of at least one of the following organizations: |                                                                                                                                                                                                                                          |  |  |  |
|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| ٧                                                                            | Name of organization                                                                                                                                                                                                                     |  |  |  |
|                                                                              | Black Law Students Association (BLSA)                                                                                                                                                                                                    |  |  |  |
|                                                                              | Wilkie D. Ferguson, Jr. Bar Association (note that law students may join WDFJBA for free by visiting <a href="https://wdfjba.wildapricot.org/Pay-Annual-Membership-Dues">https://wdfjba.wildapricot.org/Pay-Annual-Membership-Dues</a> ) |  |  |  |
|                                                                              |                                                                                                                                                                                                                                          |  |  |  |
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|                                                                              | ·                                                                                                                                                                                                                                        |  |  |  |

#### STATEMENT OF ACCURACY AND ACKNOWLEDGEMENT

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I understand and agree that if any of this information is found to be false or incomplete, or if the Foundation becomes aware of any conduct on my part which is unethical or otherwise poorly reflects on the Foundation (as determined within the sole discretion of the Foundation) the Foundation may elect to rescind any offer of a scholarship that may be extended to me. Furthermore, I understand and consent that if I am selected to receive a scholarship, the Foundation is authorized to use my name and photograph for any purpose deemed necessary to promote the Foundation's scholarship program. Nothing in this application, or any other document or representation, shall obligate the Foundation to award any scholarship.

I also understand and agree that I must be a full-time student in good standing in order to receive any disbursement of a scholarship, and that I will be required to provide proof of same. "Good standing" shall be defined as having a minimum grade point average (GPA) of 2.5 on a 4.0 scale or a GPA of 75 on a 100-point scale. The Foundation's Executive Board shall determine what is "good standing" on any other grading scale. Failure to satisfy this requirement, at any time, may result in the revocation of my scholarship, at the election of the Executive Board. The Board's decision shall be final and non-appealable.

I understand that if I am selected as a scholarship recipient, I must be present at the Wilkie D. Ferguson, Jr. Bar Association Annual Scholarship and Awards Gala or Program at a location and on a date to be announced. I acknowledge and agree that my failure to attend the gala or program to accept my award in-person will result in forfeiture of the award.

| I further affirm that I am a current associate-member of the Wilkie D. Ferguson, J | r. Bar Asso | ociation o | r that I | am a |
|------------------------------------------------------------------------------------|-------------|------------|----------|------|
| current member of my school's Black Law Students Association (BLSA).               |             |            |          |      |

| current member of my school's Black Law Students Association (BLSA). |
|----------------------------------------------------------------------|
| Signature of scholarship applicant:                                  |
|                                                                      |
| Printed name of scholarship applicant:                               |
|                                                                      |
| Date:                                                                |
|                                                                      |

# WILKIE D. FERGUSON, JR. BAR FOUNDATION SCHOLARSHIP APPLICATION 2021 ESSAY QUESTION

### **QUESTION:**

The mission of the Wilkie D. Ferguson, Jr. Bar Association is to:

Articulate and promote the goals and objectives of Black lawyers in Miami-Dade County; Foster and encourage professional excellence; Promote a greater awareness of and commitment to the civil and political rights of the local Black community; Influence positive change in the American legal community to make it more responsive to Black lawyers and to the local and national Black communities; Increase the enrollment of Black law students; Promote the general welfare of all citizens in Miami-Dade County; and Uphold the honor and integrity of the legal professional, both on the local and national level.

Please reflect on this mission and discuss what it means to you. As you prepare to enter the practice of law, how do you anticipate these goals impacting your career, if at all?

Finally, discuss what and/or who inspired you to pursue a career in the legal field, as well as any obstacles you may have encountered on your journey. Discuss what legacy you hope to leave for your family and future generations of Black lawyers, if any.