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East Coast: 271 North Avenue, Suite 812, New Rochelle, NY 10801  
844-242-3428    [www.understandinginconflict.org](http://www.understandinginconflict.org)

### **Financial Aid Policy and Scholarship Guidelines and Procedures**

The following constitutes the financial aid policy and hardship and scholarship guidelines and procedures for continuing legal education programs and courses sponsored by The Center for Mediation In Law ("The Center").

1. Requests for reduced or waived fees for CLE programs should be made in writing and submitted to The Center at least three (3) weeks before the date on which the CLE course or program is to be held.
2. The written request shall contain a statement of the economic **reasons and** the relief sought by the applicant. All requests made pursuant to these guidelines shall remain confidential.
3. A committee consisting of the Chair and members of the CLE Committee of the Executive Committee (or the full Executive Committee) shall review and decide the written request for relief. Review of CLE financial hardship requests must include but is not limited to, consideration of the following:
  - a. Nature of the requesting attorney's employment (I.e., private law firm, not-for-profit, public/government service); and whether the attorney works per diem, part-time, full-time, or by contract; or whether the attorney is unemployed;
  - b. Other financial resources available to the attorney;
  - c. Prior applications under these guidelines to any CLE provider within the past 12 months and the result of those applications.
4. The applicant shall be informed of the committee's decision, no later than three (3) days prior to the date on which the program or course is to be given, provided the application for a reduced or waived program fee has been submitted timely.
5. Attorney's with income of less than \$50,000 may receive relief under these guidelines. Such relief may constitute, but is not limited to:
  - a. Reduced program fees,
  - b. Waiving program fees, but requiring payment for materials and meals, or
  - c. In appropriate circumstances, waiving the program fee and some or all of other costs.



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### Financial Scholarship Application

Requests for reduced or waived fees for The Center for Mediation In Law-sponsored CLE programs shall be made in writing and submitted at least three (3) weeks before the date on which the CLE course or program is scheduled. Applications received less than three (3) weeks before the program shall be denied. The Center for Understanding in Conflict reserves the right to exercise discretion in the approval of the scholarship. Scholarship awards are not transferable.

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

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

**Tel #:** \_\_\_\_\_

**Fax #:** \_\_\_\_\_

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

Are you a full-time student or full-time academic? Yes [  ] No [  ]

Are you currently practicing law in New York State? Yes [  ] No [  ]

Are you a government/public interest attorney? Yes [  ] No [  ]

**Current Employer's Name:** \_\_\_\_\_

**Current Employer's Address:** \_\_\_\_\_

**Dates of Employment** \_\_\_\_\_ **Title** \_\_\_\_\_

If you have not been in your current position for at least 2 years or if you are unemployed, please list:

**Previous or Last Employer's Name:** \_\_\_\_\_

**Dates of Employment** \_\_\_\_\_ **Title** \_\_\_\_\_

**Year of Graduation from Law School:** [     ] **Year of Admission to NY Bar:** [     ]

**List all other jurisdictions in which you are admitted to the Bar:** \_\_\_\_\_

Financial Scholarship Application | The Center for Mediation in Law for CLE

What are Your Practice Area(s): \_\_\_\_\_

Employment Status: Per Diem [ ] Full Time [ ]
Part-Time [ ] Contract [ ] If so, for how long?
Unemployed [ ] Self-Employed [ ] If so, for how long?

Gross Annual Income: \$ \_\_\_\_\_

Indicate amount you are able to pay towards the program fee? \$ \_\_\_\_\_

Other information in support of this application: (aside from obtaining CLE credit, please include why you are interested in the particular program)

(Please attach a brief letter if more space is needed.)

I am requesting the following for consideration:

Reduced Program Fees [ ] Waiver of Fee [ ] Member Fee [ ]

Please fill out a separate application for each CLE program for which you would like to receive a scholarship award.

CLE Program: \_\_\_\_\_
Date of Program: \_\_\_\_\_

Have you applied for a scholarship to the The Center for Mediation in Law in the last 12 months? If so, list the name of the program(s) and date(s). Please state whether the scholarship was a reduced fee or a full scholarship.

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

I hereby certify that the information set forth herein is correct.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Scholarships may be granted to individuals with a gross annual income of less than \$50,000. A 50% discount will be granted to unemployed attorneys, as well as attorneys working for government agencies and public interest groups and to full-time students. You do not need to submit an application for these discounts to be honored - register at any time with these discounts by contacting Customer Service at 844-242-3428. Regardless of your eligibility for a 50% discount, you may still apply for a financial scholarship. The Center for Mediation in Law reserves the right to grant or deny scholarships regardless of household income and subject to the criteria set forth in the application.

This application must be submitted at least three (3) weeks prior to the program.