## **Ruth Fine Memorial Student Loan for LIS Students : 2023 Application**

| Name:                 | Phon                                 | ne:   |
|-----------------------|--------------------------------------|---|
| Address:              |                                      |   |
| City, State & Zip:    |                                      |   |
| Email:                |                                      |   |
| []Washington, DC re   | sident []Work in Washington, D       | OC area []DCLA Member*                            |
| Currently attending t | the following ALA accredited library | y/information science school:                     |
| Date accepted:        | Date degree is expected:             | indicate with an x<br>[ ] Full Time [ ] Part Time |
| Applicant's Employe   | r (if applicable):                   |   |
| Name                  | Phone                                |   |
| Address               |                                      |   |

\*Only current members of DCLA are eligible. If you are not currently a member, you can join at <u>http://www.dcla.org/membership</u>. If you are unsure about your membership status, contact dcla.sfac@gmail.com

|        | Persons submitting letters of recommendation: |        |  |
|--------|---|--------|--|
| Name:  |   | Title: |  |
| Email: |   | Phone: |  |
|        |   |        |  |
|        |   |        |  |
| Name:  |   | Title: |  |
|        |   |        |  |
| Email: |   | Phone: |  |

Submit the following supporting documents with this application:

- 1. Resume.
- 2. Statement of financial need that shows sources of income, grants, other scholarships, or loans for education vs. expenses (This should be a very simple outline, nothing too detailed is required).
- 3. Statement of professional goals including why a career in the library & information science field was chosen.
- 4. Official documentation from the university verifying enrollment in a degree program. (i.e. acceptance letter or current unofficial transcript)

CERTIFICATION: I certify in good faith that all statements made by me on this application are true, complete and correct to the best of my knowledge.

Signature of Applicant

Date of Submission

Please email this application form and all supporting documents to **dcla.sfac@gmail.com** (Be sure your name appears on each document and is included in the filename.)

All applications and supporting materials must be postmarked/ emailed by Saturday, May 20, 2023.