# CONNECTICUT SUPREME COURT HISTORICAL SOCIETY

### THE HONORABLE PETER T. ZARELLA SCHOLARSHIP APPLICATION 2025

Please <b>type</b> your answers.			
1.	Last Name:	First Name:	
2.	Mailing Address		
	Street:		
	City: State:	Zip:	
3.	Daytime Telephone Number: ( )		
	Email Address:		
4.	Date of Birth: Month Day Year	Pronouns:	
5.	<ul><li>A. Grade Point Average.</li><li>B. Letter of recommendation from a faculty member.</li></ul>		
6.	Name and address of university or law school currently attending:		
7.	Name and address of university or law school you are planning on attending in the fall:		
8.	Name & address of parent(s) or legal guardian(s) (if under 18 years old): (Include address if different than your own listed in Question 2.) Name(s) : Street:		
	City: State:	Zip:	
	Home phone of parents or legal guardians:	Work phone:	

#### 9. On a separate sheet please provide a typed essay (250 words or less) answering the questions below:

What are your specific interests in the history of the Connecticut Supreme Court, Connecticut law, or Connecticut's judicial system? Please discuss any challenges, accomplishments, or other relevant topics you have encountered in life that demonstrate how this scholarship will help you succeed in further pursuing your education or desired profession.

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#### STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the scholarship program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, I must be present at any potential awards ceremony or reception to receive my scholarship award, if requested.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of applicant: \_\_\_\_\_

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

Checklist Application Essay		
Letter of Recommendation		
MAIL COMPLETE APPLICATION PACKAGE TO:		
Patrick Fahey		
Shipman & Goodwin LLP		
One Constitution Plaza		
Hartford, CT 06103		
Or by email to:		
pfahey@goodwin.com		
plancy@goodwill.com		
REMINDER:		
THE DEADLINE FOR THIS APPLICATION TO BE RECEIVED IS:		
<u>MONDAY, JUNE 2, 2025, 4:00 P.M</u>		