



Law Librarians of Puget Sound
A Chapter of the American Association of Law Libraries
GRANT APPLICATION

Name: _____ Work Phone: _____

Institution/Employer: _____ Title: _____

Work/Mailing Address: _____

Are you a member of LLOPS? _____ Yes _____ No

Have you ever received a LLOPS grant? _____ Yes _____ No

If so, state amount(s), year(s), and program(s) attended: _____

Are you applying for the Prof. Dev. Workshop or Annual Meeting grant? (circle one)

What do you hope to learn from attending this convention/event? _____

Please read and sign the following:

If for any reason I cannot attend this convention/event, I shall immediately notify the Grants Committee and return the awarded grant to the LLOPS Treasurer.

In addition, I understand that I will be required to write a brief article for LLOPSCited about the meeting.

Signature

Date

Send completed applications to:
Dawn Kendrick Gibb, Grant Chair
Washington State Law Library
Box 40751
Olympia, WA 98504-0751