

**NORTHERN CALIFORNIA ASSOCIATION OF LAW LIBRARIES  
A Chapter of the American Association of Law Libraries  
NOCALL GRANT APPLICATION**

**NAME:** \_\_\_\_\_

**EMPLOYER:** \_\_\_\_\_

**ADDRESS:**

\_\_\_\_\_

**PHONE/EMAIL:** \_\_\_\_\_

**MEMBER OF NOCALL: Y / N MEMBER FOR \_\_\_\_\_ YEARS**

**Please describe your past and current involvement with NOCALL, and how attendance at the event in question will benefit your career:**

**Law librarian positions held (include dates, places, titles):**

**Please specify your financial need for a NOCALL grant (please estimate if you do not have an exact dollar amount):**

- **Registration costs:** \$ \_\_\_\_\_
- **Additional costs (Workshops):** \$ \_\_\_\_\_
- **Hotel costs:** \$ \_\_\_\_\_
- **Travel/Transportation costs:** \$ \_\_\_\_\_
- **Other/Incidental costs:** \$ \_\_\_\_\_

**Please describe any special circumstances or additional information to be used in determining your eligibility for a grant:**