



**ILLINOIS STATE
BAR ASSOCIATION**

Affiliated Bar Association Grant Program

Dear Affiliated Bar Leader:

Thank you for your interest in the Affiliated Bar Association Grant Program, sponsored by the ISBA Standing Committee on Member Services. The grant provides up to **\$750** to affiliated bars, like yours, to **plan activities that promote your bar, the ISBA and the legal profession.**

To qualify for the grant, the following requirements must be met:

- 1) **The activities must impact the general public** and not solely the legal profession. *Requests for monies to be used for food or other refreshments will not be granted. Judicial appreciation nights, bar association social events, bar association retreats, or other programs that are closed to the public and attended only by members of the legal profession will not be funded.*
- 2) **The ISBA must be recognized as a sponsor** along with your affiliated bar association in any publicity and other printed materials.
- 3) You must **submit a report** regarding the completed activity within 30 days of the event/activity. Copies of all publicity and other printed materials must be submitted with the report.

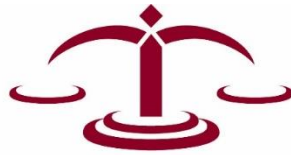
To participate in the 2018-2019 Affiliated Bar Grant Program, complete the enclosed application and return by email (tslating@isba.org) or mail to: *c/o Tim Slating*, Illinois State Bar Association, 424 S. Second St. Springfield, Il 62701.

There is no deadline, but **your application should be received well in advance of the planned activity.** *Note the Grant Guidelines enclosed.*

Please let me know if you have any questions.

Thank you!

Timothy A. Slating
ISBA Asst. Exec. Dir. for Communications
800-252-8908 | tslating@isba.org



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Affiliated Bar Association Grant Program Application

**Complete and return this form by email (tslating@isba.org) or mail to:
Tim Slating, Illinois State Bar Association, 424 S. Second St., Springfield, IL 62701
PLEASE NOTE: All requested information must be submitted for grant consideration.**

SUBMITTING BAR INFORMATION

Name of Bar Association:

Contact Name:

Your Office/Position in the Bar:

Address/City/Zip:

Telephone Number:

Email Address:

PROGRAM DESCRIPTION

Title of Program:

Program Description:

How will the program promote your bar, the ISBA & the legal profession?

What type of publicity or printed materials will be used?

PROGRAM FUNDING REQUEST

Amount Requested	Proposed Program Date

PLEASE ATTACH BUDGET INFORMATION

State the reason for amount requested.

Will any fee be charges for this event?

How much will your bar association be contributing?

How much funding will be obtained from other sources?

SIGNATURE:

DATE:

PRINT NAME:
