

2025 ALFORD EXCELLENCE AWARD APPLICATION

APPLICANT INFORMATION PLEASE ATTACH ADDENDA IF ADDITIONAL SPACE IS NEEDED Name: Address: Email: Date of Birth: Phone: Bar Examination Date: ☐ February 2025 □ July 2025 **ACADEMIC CREDENTIALS** Law School(s) Attended: G.P.A.: Class Rank: Honors/Awards: **COMMUNITY SERVICE** (WITHIN THE LAST FIVE YEARS) Name or Organization/Service Project: Approx. Service Hours: Contact Name and Title: Contact Phone and Email: Nature of Service: ADDITIONAL INFORMATION Applicant Signature: Date: