

Selendy & Gay Fellowship

Please complete and submit application to:
Selendy & Gay Fellowship Program
c/o Josette Winograd
Fellowship@selendygay.com

CONTACT INFORMATION

First Name _____ Last Name _____
Address _____
City _____ State _____ Zip Code _____ Country _____
Email _____ Phone Number _____
Law School _____ Graduation Year _____

BACKGROUND

Check all that apply

- Asian American Indian/Alaskan Black/African American Hispanic or Latino
 Native Hawaiian/Pacific Islander White Other I do not wish to self-identify

Gender

- Female Male Non-binary Other I prefer to not answer

Pronouns

- She/her/hers He/him/his They/them/their Other _____ I prefer to not answer

Sexual Orientation

- LGBTQA+ Heterosexual / Straight Other I prefer to not answer

Disability

US Veteran

First Generation College Student

PERSONAL ESSAY

Tell us about a time when you've overcome adversity. How did the experience impact your sense of resilience? (Please limit your response to no more than 1,000 words, double-spaced.)

Essays should be attached as a separate Word doc.

This is an application for a Selendy & Gay Fellowship; it is not an application for employment with Selendy & Gay. **Only candidates who separately apply for and receive an offer of employment with the Firm are eligible to be considered for a Fellowship.** While we encourage you to submit a Fellowship application at the same time you apply for employment with the Firm, we will notify you of our decision on this application only after we extend an offer of employment.

CONFIRMATION

By signing this application, I hereby certify that the above and enclosed statements and information are true, accurate and complete to the best of my knowledge. I understand that any false or misleading statements and/or information given by me in connection with this application will disqualify me from consideration for the Selendy & Gay Fellowship Program.

Signature _____

Date _____