The Shelley Leinheardt Fund, Inc. Grant Application

Applicant's name: _____
Address: _____
Phone number: (_____) _____ Email: _____

Attorney representing the applicant : _____
Firm: _____
Address: _____
Phone number: (_____) _____ Email: _____

What grant amount is requested (maximum $5,000.00): $_____.00

In a separate document:

Provide the following:

1. A cover letter of not more than 6 pages detailing information about the case and its procedural history, relevant facts, claims, defendants, anticipated expenses and an explanation as to how the funds will be used. Please provide a realistic explanation of any weaknesses in the case. If the applicant believes that the prosecution of this case will advance employee rights, please explain how. If the applicant considers this an impact case, please explain why.

2. In support of the above please provide a copy of the summons and complaint and, if available, an answer.

Provide a CV or recent fee application from which the Advisory Committee may evaluate counsel's experience.

This grant is contingent upon the following terms:

If awarded a grant, both the attorney and the applicant agree to sign the attached Grant Agreement promising that grant funds will not be used to pay attorney fees and that the applicant shall repay the grant amount to SLF if there is a recovery in the litigation before payment of attorney fees or any other disbursement.

Signature below indicates acceptance and understanding of the terms above.

_____ _____
Applicant (print name): _____ Date

_____ _____
Attorney (print name): _____ Date

Applications may be emailed to the theslfgrantfund@outlook.com or faxed to (212) 226-7716.