



INDIANA SHERIFFS' ASSOCIATION, INC.

7124 E County Road 150 S, Suite B; Avon, IN 46123-2001

1-800-622-4779



I.S.A. SCHOLARSHIP PROGRAM APPLICATION

QUALIFICATIONS

1. ALL APPLICANTS MUST BE AN INDIANA RESIDENT.
2. ALL APPLICANTS MUST BE COMMITTED TO PURSUING AN EDUCATION AND CAREER IN A LAW ENFORCEMENT FIELD AT AN INDIANA COLLEGE OR UNIVERSITY.
3. ALL APPLICANTS MUST BE A CURRENT MEMBER OF THE ASSOCIATION, OR A DEPENDENT CHILD OR GRANDCHILD OF A CURRENT MEMBER OF THE ASSOCIATION. If you do not meet the membership requirement, an application for membership is attached to this application. Just complete the application and return it with this Scholarship Application to meet the requirement.
4. ALL APPLICANTS MUST ENROLL AS A FULL-TIME STUDENT (12 hours).

**ALL INFORMATION MUST BE TYPED OR HAND PRINTED NEATLY, COMPLETED IN FULL AND RETURNED TO:
Indiana Sheriffs' Association, 7124 E County Road 150 S, Suite B;
Avon, IN 46123-2001.**

DEADLINE – APRIL 1

To be completed by the applicant – MUST BE TYPED OR HAND PRINTED NEATLY

Parent(s) Name(s) _____

1. Do you reside with your parents? Yes _____ No _____

I am currently enrolled in a college/university as a: _____ Freshman _____ Sophomore _____ Junior _____ Senior _____

I am currently enrolled as a senior in high school Yes _____ No _____

Number of semesters or quarters completed at end of current school year: _____ Quarters _____

Field you plan to major in _____ (Must be committed to pursuing an education and career in a law enforcement field)

Name of college or university you attend or plan to attend _____

School Address _____ Street _____ City _____ State _____ ZIP _____

Name of high school you attend(ed) _____ Year graduate(d) _____

Mother's Address _____ Phone numbers: (____) _____ Home _____ Cellular _____

Mother's Name _____ Place of Employment _____ Position Held _____

Father's Address _____ Phone numbers: (____) _____ Home _____ Cellular _____

Father's Name _____ Place of Employment _____ Position Held _____

Address of I.S.A. Member _____

Name of I.S.A. Member _____ Relationship to Applicant _____

Date of Birth _____ E-Mail Address _____

Telephone Number (____) _____ Home County _____

Home Address _____ Post Office Box or Street _____ City _____ State _____ ZIP _____

Name _____ Last _____ First _____ Middle _____ Male or Female _____

2. List adjusted gross income of **parent(s)** reported on last I.R.S. tax return \$ _____

Question #2 is required to be answered

3. List **your** (student's) adjusted gross income as reported on last I.R.S. tax return \$ _____

4. Please list names, ages and relationships of dependents in your immediate household:

<u>Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Name</u>	<u>Age</u>	<u>Relationship</u>
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

5. Number of household members (other than yourself) that are full-time college students _____

6. What methods do you plan to use to finance your college education?

7. Please list any special awards or recognition you have received for scholarships or other scholastic oriented achievements.

8. If received scholarship(s), list amount(s) and what funds are to be utilized for (ie: books, tuition, etc.)

9. Please list any hobbies or leisure-time activities that are of interest to you and any special recognition you may have received from these activities.

10. Please list your principal high school and/or college clubs, organizations, activities and any offices or positions held.

<u>Activity</u>	<u>Office/Position</u>	<u>Years Held</u>
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11. Please list any non-school or community activities in which you have participated (Scouts, 4-H, youth groups, service organizations, etc.)

<u>Activity</u>	<u>Office/Position</u>	<u>Years Held</u>
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12. Please list part-time and summer employment. List most recent first.
Employer
Duties
Part-time/Summer (Specify)

13. Are you or have you been a 21st Century recipient? Yes _____ No _____

14. Have you ever been arrested for any alcohol and drug related offenses?
Yes _____ No _____ If yes, list arrest type(s) and date(s)

15. Have you ever received an I.S.A. Scholarship Yes _____ No _____
Amount \$ _____ Year(s) received _____

16. How did you learn about our scholarship program? (parent, grandparent, school, law enforcement officer, Internet, etc.) _____

17. Have you attended the I.S.A. Youth Leadership Camp? Yes _____ No _____

18. On a separate sheet of paper, please **write a short essay** on: **(Required to complete #18)**
(a) your proposed course of college study,
(b) how you reached this decision,
(c) what you expect to gain from college,
(d) your personal goals and ambitions
Be thoughtful in developing your essay. The essay is your opportunity to convey your motivations and personal characteristics to members of the Selection Committee.

19. Have a School Official (principal, teacher, professor, etc.) write a short appraisal of your scholastic achievements, leadership ability, extra-curricular activities, initiative, citizenship and financial needs.

A transcript of grades must be mailed with application. High school students are to provide a high school transcript and College/University students are to provide college transcript.

I believe myself eligible for the Indiana Sheriffs' Association Scholarship Program and certify that all information contained in this application is complete and true. I understand the decisions of the Selection Committee in the selection of scholarship winners will be final.

Signature of Applicant

Signature of Parent or Guardian

Date

INDIANA SHERIFFS' ASSOCIATION

YOUR
PROFESSIONAL
ORGANIZATION



SUPPORT YOUR
SHERIFF'S OFFICE

BECOME A MEMBER TODAY

INDIANA SHERIFFS' ASSOCIATION ASSOCIATE MEMBERSHIP APPLICATION

_____ I am enclosing my annual Associate Membership Dues.....\$24.00
(Membership credentials consist of a membership card, two I.S.A. star decals and a year's subscription to THE INDIANA SHERIFF)

_____ I am enclosing our Associate Family Dues (Includes primary member & spouse).....\$35.00

Spouse's Name _____

*Unmarried dependent children over 14 days and under 19 years

(Available through Family Membership Only).....\$10.00 each x ____ = \$_____

Name(s) _____

(Family membership credentials consist of a membership card per member; three I.S.A. star decals per family and a year's subscription to our newsletter, THE INDIANA SHERIFF, per family)

In addition to my dues, please send me #_____ membership license tags @ \$5.50 each.....\$_____

Please use the following amount to assist the Indiana Sheriffs' Scholarship Fund.....\$_____

Leadership Camp.....\$_____

Training Fund.....\$_____

TOTAL ENCLOSED.....\$_____

Name of Applicant _____

Address _____ City _____ State _____ ZIP _____

County _____ E-Mail Address _____

Dues and contributions to the Indiana Sheriffs' Association are tax deductible under 501(c)3 of the I.R.S. Code. Please make check payable to INDIANA SHERIFFS' ASSOCIATION. Mail to: 7124 E County Road 150 S, Suite B; Avon, IN 46123-2001 – Telephone – 800-622-4779

If you are applying for a scholarship and do not meet the requirement, you can use this application to apply for membership. Just complete the application and return with the Scholarship Application.

