2004
Florida Sheriffs Association Scholarships Available

WHO IS ELIGIBLE?

This program is open to any dependent son or daughter of a full-time sheriff's office employee. The dependent must be attending a regionally accredited community college, college or university (i.e., the Southern Association of Colleges and Schools), in the school term to begin in the Fall, 2004. The dependent's career objective and degree must be focused towards law enforcement, law, corrections, or another aspect of criminal justice. Unrelated course majors are not eligible.

HOW MANY ARE AWARDED AND HOW MUCH ARE THEY WORTH?

Up to three (3) separate scholarships may be awarded, valued at $1,000 each.

SPECIAL INFORMATION:

All applications for scholarships must be accompanied by certain documentation, a listing of which is included in the application package.

WHERE CAN I GET AN APPLICATION PACKAGE?

Contact the sheriff's executive secretary or administrative assistant within the Office of Sheriff in the county in which you work. Each of them has been issued a single master copy of the application form and procedures, and they will provide you with a copy for your use.

WHAT IS THE APPLICATION DEADLINE?

To facilitate the work of the screening committee, applications for scholarships must be received at FSA headquarters by Friday, June 11, 2004. Winners will be notified shortly thereafter.

IF I NEED FURTHER INFORMATION, WHERE DO I CALL?

Call Carol Bishop, Florida Sheriffs Association headquarters in Tallahassee, (850)877-2165.

APPLICATION FOR

FLORIDA SHERIFFS ASSOCIATION COLLEGE SCHOLARSHIP

For the school year beginning in the Fall, 2004

Name_____ Nickname_____

Mailing Address_____ IN FALL, 2004 ___ Freshman ___ Sophomore

City_____ ___ Junior ___ Senior

State_____ Zip_____

Home phone( )_____

Date of Birth_____ THIS YEAR: Class rank _____
Father's name _____ Class size _____

Mother's name _____ GPA _____

(***Feel Free To Use Additional Sheets, If Necessary***)

Since at least one of the applicant's parents must be a full-time, paid (sworn or civilian) employee of a sheriff's office in Florida, it is my Mother / Father (circle one) who is employed at the:

Sheriffs Office in _____County

Parent Name _____

Position held _____

My intended career path after college is*

LAW ENFORCEMENT_____ CORRECTIONS_____

OTHER CRIMINAL JUSTICE RELATED_____

(*APPLICANTS MUST PLAN TO PURSUE a criminal justice related career)

What experience, if any, have you had related to law enforcement, corrections, or the courts? Give details, including dates, locations, and duties.

_____

_____

_____

I have been active in the following school and/or community organizations:

_____

_____

_____

List any leadership positions you have held in school and/or community organizations, and which of those positions you now hold:

_____

_____

_____

List all awards or commendations you have received, the sponsoring organizations, the reason for your winning, and date of award:

_____

_____

_____

_____

Name of community college, college or university you will be attending in the Fall, 2004:
(Must be regionally accredited, e.g. by the "Southern Association of Colleges & Schools")

_____

City _____ State _____

Which specific degree or certification will you be working towards?

_____

_____

EXTENUATING CIRCUMSTANCES

If there are extenuating family circumstances that should be brought to the attention of the screening committee, in their consideration of this application, please explain:

_____

_____

_____

_____

ATTACHMENTS

1. A copy of your most recent transcript (H.S. or college).

2. An original essay of at least 750 words on the role of law enforcement or corrections in a free society.

3. Three letters of recommendation, including at least one from: (1) a school or community official, and (2) a law enforcement or corrections official (not your parent). These letters should specifically address your qualifications for this scholarship.

_____

APPLICANT'S OATH & APPROVALS

Applicant's Oath

AS AN APPLICANT FOR AN FSA SCHOLARSHIP, I HEREBY CERTIFY THAT:

1. I am presently in good health and know of no physical or psychological limitation I have that would prevent my full participation in a police, corrections or related career.

2. I know of no reason why the school or college listed above would not accept me as a full-time student in the Fall, 2004.

3. I certify the accuracy and truthfulness of the facts contained in this application.

4. I understand that this scholarship is a one-time award that is limited to $1,000, and should I win the award, that the check will be made **payable only to the regionally accredited college or university of my choosing**, and placed in an account bearing my name. I further understand that I will be allowed to draw against that account for full-time tuition and book expenses only, until the account balance is exhausted.

5. I understand that funding beyond this $1,000 award is not expressed, implied or expected, and that all unused scholarship money which remain on account for me in an "inactive" status for 12 months or more, will revert back to the Florida Sheriffs Association.

6. I understand that the balance of my college expenses (tuition, books, lodging, etc.) above the sum of $1,000 are my responsibility, and not the responsibility of the Florida Sheriffs Association.

_____ _____

Signature Date

Parent/Guardian Approval and Waiver

I, _____, as parent or legal guardian of the applicant named herein, approve of my dependent son or daughter's application for a Florida Sheriffs Association Scholarship. In consideration of the benefits derived from this award, I agree that if my child should be awarded a scholarship, I hereby voluntarily waive any claim against the Florida Sheriffs Association, its officers, members or directors, or any of its subsidiaries, for any and all causes that may arise as a result of being awarded this scholarship.

I CERTIFY that I am a full-time (civilian or sworn), paid employee of the sheriff's office in_____County, holding the position of _____.

FURTHER, I CERTIFY that my son or daughter plans to attend a regionally accredited community college, college or university, in the fall of this year, and that, thereafter, (s)he plans to pursue a career in law enforcement, corrections, or a related criminal justice field.

_____ _____
Signature Date

_____
Printed Name

_____
Daytime Phone Number

****DEADLINE** - This application must be completed and received at the Florida Sheriffs Association headquarters by no later than June 11, 2004. Scholarship winners will be notified shortly thereafter. If you have any questions, please call Carol Bishop of FSA staff at (850) 877-2165. Mail completed applications to:

Florida Sheriffs Association
ATTN: Scholarship Committee
Post Office Box 12519
Tallahassee, Florida 32317-2519