

PERSONAL DATA

Virginia Sheriffs' Institute Scholarship Application Form

To Be Completed by the Applicant. Please Type or Print in Black Ink.

Name (First, MI, Last)							
Home Street Address							
City		State			Zip		
Telephone No.		Resident She	eriff				
E-mail Address							
Are you a child/spouse of ar	n active or retired law enforce	ement officer?		Circle:	Yes	No	
If yes, what law enforcemen	nt agency?						
EDUCATION							
High School Name				Year Grad	uated		
High School Address (City,	State)						
College/University Attending]						
College Street Address							
City		State			Zip		
Indicate your class status fo	or the academic year 2013-20	14 by circling	the correct an	swer below			
Freshman	Sophomore	Junior		Senior		Graduate	
Declared Major			Declared Mir	nor			
Will you be enrolled as a ful	I-time or part-time student?		Circle: Full	-time	Part-	lime	
Have you ever received a V	irginia Sheriffs' Institute Scho	olarship? Cir	cle: Yes	No			
STATEMENT OF ACT	TIVITIES, HONORS, LI	EVDEDONI	D				
List school and community a	activities, including years in weshman student. Identify lead	vhich you parti	icipated. High				
Dates			Activity				

Supply a brief resume of any work experience, including your position, starting and terminating dates and any other pertinent Information. Employer Position Dates Dates

ESSAY AND ATTACHMENTS

On a separate sheet of paper, please write a short essay on (a) your proposed course of college study, (b) how you reached this decision, (c) what you expect to gain from college, and (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 committee making the scholarship decision.

- * Please attach your high school records and SAT scores (freshman applicants only) or your college records indicating your grade point average.
- * Please attach a letter of acceptance or other proof of acceptance from the college/university you plan to attend.
- * Please attach a letter of recommendation from the sheriff of the jurisdiction <u>in which you live</u>.

CERIFICATION AND SIGNATURE

I believe myself eligible for the Virginia Sheriffs' Ins	stitute scholarship program and certify that all information contained in this
application is complete and true.	
I understand that the decisions of the committee in	n the selection of the scholarship recipients will be final.
1	
Signature of Applicant	Signature of Parent or Guardian
Signature of Applicant	Signature of Parent or Guardian (Applicants less than 18 years old)
Signature of Applicant Date	· ·

Please Return the Completed Application with Essay and Attachments to:

Major Susie Doyel Arlington County Sheriff's Office 1425 North Courthouse Road, Suite 9100 Arlington, Virginia 22201 703.228.4461

The Virginia Sheriffs' Institute scholarship deadline is **May 1, 2013**. This application must be received in the Institute's office by that date. **The deadline will be strictly adhered to**.