



INDIANA SHERIFFS' ASSOCIATION, INC.
147 EAST MARYLAND STREET; INDIANAPOLIS, IN 46204-3608
1-800-622-4779



I.S.A. SCHOLARSHIP PROGRAM APPLICATION

The attached form for the Indiana Sheriffs' Association Scholarship Program consists of two parts:

- PART I** to be completed by you, the applicant, and signed by you and your parents or guardian. High School students **must** provide a transcript of high school grades. College students **must** provide a transcript of college grades.
- PART II** to be completed and signed by your high school principal, college registrar or qualified school official.

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).**
- 5. ALL APPLICANTS MUST HAVE TAKEN THE SCHOLASTIC APTITUDE TEST (SAT) OR THE AMERICAN COLLEGE TEST (ACT).**

ALL INFORMATION MUST BE TYPED OR HAND PRINTED NEATLY, COMPLETED IN FULL, AND RETURNED BEFORE APRIL 1 TO: Indiana Sheriffs' Association; 147 East Maryland Street; Indianapolis, IN 46204-3608.

PART I--To be completed by the applicant--MUST BE TYPED OR HAND PRINTED NEATLY

Name _____
Last First Middle

Home Address _____
Post Office Box or Street City State ZIP

Telephone Number (_____) _____ Home County _____

Date of Birth _____ Last four (4) digits of Social Security # _____

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

Address of ISA Member _____

Father's Name Place of Employment Position Held

Father's Address Home Telephone # Business Telephone #

Mother's Name Place of Employment Position Held

Mother's Address Home Telephone # Business Telephone #

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

School Address _____
Street City State ZIP

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

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

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

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

I am currently enrolled in a college/university as a: (circle one)
Freshman Sophomore Junior Senior

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

Parent(s) Name _____

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

#2 Must 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. 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.

9. 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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_____	_____	_____
_____	_____	_____
_____	_____	_____

10. 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>

11. Please list part-time and summer employment. List most recent first.

<u>Employer</u>	<u>Duties</u>	<u>Part-time/Summer (Specify)</u>

12. Have you ever been arrested for any alcohol or drug related offenses?

Yes _____ No _____ If yes, list arrest type(s) and date(s) _____

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

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

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

16. On a separate sheet of paper, please **write a short essay** on: **(Must complete #16)**

- (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.

Please remember, a transcript of grades must be mailed with application. High school students are to provide a high school transcript and College students are to provide a 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 authorize my high school principal, or the office of registrar, or financial aid office or qualified school official to complete the remainder of this form and forward the required school records to the Selection Committee of the Indiana Sheriffs' Association Scholarship Program.

I understand that the decisions of the Selection Committee in the selection of scholarship winners will be final.

Signature of Applicant

Signature of Parent or Guardian

Date _____

PART II – To be completed by the High School Principal, College Registrar or Qualified School Official -- MUST BE TYPED OR HAND PRINTED NEATLY

TO THE SCHOOL OFFICIAL:

The Indiana Sheriffs' Association Scholarship Program is designed to recognize the academic achievements and total development of high school seniors and/or college students. Applicants are competing for a \$500 I.S.A. scholarship from within their area of the state.

In order to best evaluate the applicant, the Selection Committee needs information from you. It is hoped your comments will be complete and thoughtful in order to provide the Committee with a total picture of the applicant.

IF YOU FEEL THAT YOU, AS THE HIGH SCHOOL PRINCIPAL OR COLLEGE REGISTRAR, DO NOT KNOW THE APPLICANT WELL, THE FOLLOWING INFORMATION MAY BE PREPARED AND SUBMITTED BY ANOTHER QUALIFIED SCHOOL OFFICIAL. THANK YOU FOR YOUR HELP AND COOPERATION.

Student's Name _____

1. This student ranks _____ in a class of _____ students at the end of _____ semesters.
2. This student's GPA is _____ on a scale of _____
3. This student took the Scholastic Aptitude Test (SAT) or the American College Test (ACT) on _____. Please indicate scores achieved: Verbal _____ Math _____
4. Attached is the transcript of the student's high school records for _____ semesters or college transcript for _____ semesters.
5. List student's attendance record _____

If the information is not included on the transcript, please indicate:

Passing Grade _____ Grade recommended for college work _____

Type of course taken (General, College Preparatory, etc.) _____

5. Please use the space below to give the Selection Committee your appraisal of the student. Your comments should include an appraisal of the student's scholastic achievements, leadership ability, extra-curricular activities, initiative, citizenship and financial need.

Name of School _____

School's Address _____
Street City State ZIP

Your Name _____ Position _____

Your Signature _____ Date _____

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INDIANA SHERIFFS' ASSOCIATION



**YOUR
PROFESSIONAL
ORGANIZATION**

ISA

BECOME A MEMBER TODAY

INDIANA SHERIFFS' ASSOCIATION ASSOCIATE MEMBERSHIP APPLICATION

_____ I am enclosing my annual Associate Membership Dues..... \$ 24.00
 (Membership credentials consist of membership card, two I.S.A. star decals and releases of our newsletter, 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 releases of our newsletter, THE INDIANA SHERIFF, per family)

In addition to my dues, please send me # _____ membership license tags @ \$5.50.....\$ _____
 Please use the following amount to assist the Indiana Sheriffs' Scholarship Fund.....\$ _____
 Youth Leadership Camp.....\$ _____
 Training Fund.....\$ _____
 TOTAL ENCLOSED.....\$ _____

Name of Applicant _____
 Address _____ City _____ State _____ Zip _____
 County _____

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: 147 East Maryland Street, Indianapolis, IN 46204-3608. Telephone 1-800-622-4779

SUPPORT YOUR SHERIFF'S OFFICE

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