



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

Name _____
Last First Middle Male or Female

Home Address _____
Post Office Box or Street City State ZIP

Telephone Number (____) _____ Home County _____

Date of Birth _____ E-Mail Address _____

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

Address of I.S.A. Member _____

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

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

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

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

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:
_____ Freshman _____ Sophomore _____ Junior _____ Senior

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

Parent(s) Name(s) _____

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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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 membership requirement, you can use this application to apply for membership. Just complete the application and return with the Scholarship Application.