



SCHOLARSHIP APPLICATION GUIDELINES

Please carefully read the guidelines below; incomplete applications will not be considered for an award.

If there are any extenuating circumstances we should know about, please attach a separate explanation. Be sure to check all of your facts and figures for accuracy.

We ask that you adhere to the following guidelines when you apply:

- A parent who is an active LEO must be in good standing with the Rockingham County Law Enforcement Officers Association and paid their dues for the current year.
- For non-members, the Organization will accept applications from students who are full-time residents of Rockingham County majoring in Criminal Justice.
- All applicants must submit a formal resumé of:
 - goals and objectives after college graduation
 - academic honors
 - any extracurricular activities
 - work experience
 - volunteer experience
- Please add anything else you would like the Committee to know about you.
- All applicants must submit a high school or college transcript.
- High school seniors must include a copy of the acceptance letter from the institution of higher learning.

It is expected that the student will attend the school cited on the application.

It is understood that the term “academic year” begins with the fall semester of the current year.

Applications **MUST** be postmarked by May 1st of the current year and sent to the address below. Late or incomplete applications will not be considered for an award.

The recipients will be notified by May 15th of each year. Scholarships will be presented at the monthly meeting held in July.



ROCKINGHAM COUNTY

LAW ENFORCEMENT OFFICERS ASSOCIATION

SCHOLARSHIP APPLICATION

APPLICANT INFORMATION

APPLICANT NAME _____

NAME OF RCLEOA MEMBER PARENT _____

DEPARTMENT/AGENCY AFFILIATION _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

EMAIL _____

HOME PHONE _____ CELL PHONE _____

STUDENT LIVES WITH: FATHER MOTHER GUARDIAN RELATIVE

COLLEGE/UNIVERSITY STUDENT WILL ATTEND _____

MAJOR/COURSE OF STUDY _____

CHECK ONE: RESIDENT COMMUTER

COST PER YEAR (FROM PAGE 4) _____

YEAR UPCOMING FALL: FRESHMAN SOPHOMORE JUNIOR SENIOR



ROCKINGHAM COUNTY LAW ENFORCEMENT OFFICERS ASSOCIATION

SCHOLARSHIP APPLICATION

TO BE FILLED OUT BY FIRST PARENT (GUARDIAN)

NAME _____

EMPLOYED? YES NO UNABLE TO WORK*

TYPE OF EMPLOYMENT _____

IF UNABLE TO WORK, PLEASE PROVIDE A BRIEF EXPLANATION:

SIGNATURE _____ DATE _____

TO BE FILLED OUT BY SECOND PARENT (GUARDIAN)

NAME _____

EMPLOYED? YES NO UNABLE TO WORK*

TYPE OF EMPLOYMENT _____

IF UNABLE TO WORK, PLEASE PROVIDE A BRIEF EXPLANATION:

SIGNATURE _____ DATE _____

NUMBER OF DEPENDENTS (INCLUDING AGES) LIVING IN HOUSEHOLD: _____

MEMBERS OF FAMILY ATTENDING OTHER SCHOOLS OF LEARNING BEYOND HIGH SCHOOL
(LIST NAME, INSTITUTION AND EXPECTED YEAR OF GRADUATION)



FINANCIAL INFORMATION

| A. COLLEGE COSTS | RESIDENT | COMMUTER |
|-------------------------|-----------------|-----------------|
| TUITION & GENERAL FEES | | |
| BOOKS & SUPPLIES | | |
| ROOM & BOARD | | N/A |
| COMMUTING ALLOWANCE | N/A | |
| TOTAL ESTIMATED COST | | |

| B. ESTIMATED RECEIPTS | |
|------------------------------|--|
| SCHOLARSHIPS RECEIVED | |
| SOCIAL SECURITY BENEFITS | |
| LOANS | |
| WORK STUDY | |
| VETERAN'S BENEFITS | |
| SUMMER EARNINGS | |
| FUNDS FROM PARENTS | |
| TOTAL ESTIMATED RECEIPTS | |

| C. APPLICANT'S NEEDS | |
|-----------------------------|--|
| TOTAL SCHOOL COSTS | |
| LESS TOTAL RECEIPTS | |
| NEED | |

AMOUNT OF FINANCIAL AID PARENTS ARE ABLE TO PROVIDE FOR UPCOMING COLLEGE YEAR
