



FAIRFAX COUNTY POLICE ASSOCIATION

Children's Scholarship Application

www.thefcpa.org

<i>Applicant Information</i>					
Applicants Name (print): Last		First	M.I.	Social Security Number:	Date of Birth:
Home Address: Street	City		State	Zip	
E-mail Address:			Home Phone		
			Work Phone		
<i>Sponsors information</i>					
Name of Sponsor (FCPA member):			Member Status: <input type="checkbox"/> Active <input type="checkbox"/> Retired (life member)		
Place of Employment:					
Number of Children in Family			Number of children attending school of higher learning:		
<i>School information</i>					
Name of High School and Year of Graduation:				Grade Point Average:	
Name of College:				Grade Point Average:	
Address:					
Have you been accepted?		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Major Course of Study:			Type of Degree Pursuing:		

Signature of Applicant: _____ Date: _____

Please return completed and signed forms along with any accompanying documentation via U.S. Mail to:

Fairfax County Police Association
5625 Revercomb Court
Fairfax, Virginia 22030

-----Police Association Use Only-----

Date Received: _____

Sorting Number: _____

Results: _____

Chair: _____

CHILDREN'S SCHOLARSHIP INFORMATION AND INSTRUCTIONS

Scholarship rules are as follows:

1. This scholarship fund is open to the children of active and retired Police Association Members. Members must be in good standing since January 1, 2010 or earlier. Applicants must be the age of 22 or under and enrolled in, or have been accepted to, a college or vocational school.
2. Recipients may not have been a previous scholarship recipient in 2009.
3. If selected, payment will be made to the school, not to the recipient.
4. In addition to completing this application please submit the following additional information:
 - Compose a written or typed essay about yourself and how you will benefit from a college or vocational education.
 - A copy of the most recent high school or college transcript
 - A list of all academic awards or honors
 - A list of all extra curricular activities, clubs or organizations that you were an active participant in.
5. All contents of this application and any other documents submitted will be subject to review by the scholarship committee for the purpose of awarding a scholarship winner. All information will be kept confidential.
6. Once submitted, your name and any other identifying information in your application packet will be removed and replaced by a sorting number prior to review by the scholarship committee. Awards will be based on applicant's merit only and not any other outside factors.
7. All documents submitted by applicant will not be returned.
8. Applicants will be notified by mail as to status of their application.

Please return your information via U.S. Mail by close of business on Friday, August 6th to:

Fairfax County Police Association
5625 Revercomb Ct.
Fairfax, VA 22030
ATTN: Scholarship Application Fund