

New York State Deputies Association, Inc.

61 Laredo Dr.

Rochester, NY 14624

APPLICATION FOR NYSDA MEMBER SCHOLARSHIP AWARD

Instructions

1. *Each full and basic member association is eligible for one \$250 scholarship each calendar year.*
2. *Applicant must be an Association member, or the child or spouse of an Association member. The following information must be included.*
Name of Association Member (if self, so state): _____
Name of Association: _____
Name of Association President: _____
3. *The applicant must be seeking a degree in a Criminal Justice related field.*
4. *Applicants may be either full-time or part-time students.*
5. *Scholarship award must be payable to an accredited college or university. The winner will be asked to designate the appropriate institution at the time of the award.*
6. *Applicants may apply for the scholarship in each year that they attend college level courses. Receipt of the scholarship in one year does not disqualify them in future years.*
7. *Completed applications must be postmarked or e-mailed on or before **March 15** of the year that the application is made.*
8. *If application is mailed, it must be signed. If e-mailed, applicant's name should be typed in the signature box.*
9. ***Please print or type all information***
10. *A copy of applicant's most current transcript (high school or college as appropriate) must be submitted. It need not be a certified copy - photocopies are acceptable. If the application is mailed, include the transcript. If the application is e-mailed, you may scan and include the transcript in the e-mail, or send the transcript separately via U.S. Mail.*
11. *If sending via U.S. mail send to:*
New York State Deputies Association, Inc.
Scholarship Committee
61 Laredo Dr.
Rochester, NY 14624
12. *If sending via e-mail, send to tross1@rochester.rr.com.*

NOTE: ALL STATEMENTS ARE SUBJECT TO VERIFICATION



New York State Deputies Association, Inc.
Member Scholarship Application

Applicant Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-Mail: _____

Name of school currently attended: _____

Current Grade Point Average: _____

List extra curricular activities in which you regularly participate. This includes sports, hobbies, clubs. Also list any awards you have received.



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Member Scholarship Application

Explain the reasons for your interest in a criminal justice career and your ultimate career goals. Include the college or university that you will attend (or have applied to), and the program you intend to study.

I affirm that the statements made on this application, including any attached papers, are true. I also authorize any designee of the New York State Deputies Association, Inc. to conduct any investigation necessary to verify information included in this application or attachments.

Signature

Date