

APPLICATION FOR MISSOURI SHERIFFS' ASSOCIATION SCHOLARSHIP

(for Criminal Justice Majors only)

Return to Sheriff Stuart Miller, Audrain County Sheriff's Office, 1100 Littleby Rd., Mexico, MO 65265. Please enter information in spaces provided, (type or print in ink). Applications must be received no later than January 31, 2016

Name \_\_\_\_\_
Last First Middle

Home Address \_\_\_\_\_
Street City State Zip

Phone Number \_\_\_\_\_ County \_\_\_\_\_ Social Security No. \_\_\_\_\_

Email \_\_\_\_\_

Name of Parent or Guardian \_\_\_\_\_

Where are your parents employed? \_\_\_\_\_
Father

\_\_\_\_\_
Mother

Are you related to any Missouri Sheriff or Missouri Sheriffs' Association employee? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, to whom and how are you related? \_\_\_\_\_

I have made application to enroll at \_\_\_\_\_

Date you expect to enter (month/year) \_\_\_\_\_

What type of education or field of training do you plan to pursue? \_\_\_\_\_

\_\_\_\_\_

PLEASE ATTACH A SHORT PARAGRAPH IN WHICH YOU DESCRIBE WHAT YOU EXPECT TO BE DOING IN YOUR CAREER TEN YEARS FROM NOW.

In what extra-curricular activities have you participated in high school? \_\_\_\_\_

\_\_\_\_\_

What work experience have you had? \_\_\_\_\_

\_\_\_\_\_

What are your hobbies? \_\_\_\_\_

\_\_\_\_\_

What is the extent of your participation in out-of-school activities? \_\_\_\_\_

\_\_\_\_\_

Why do you want to continue your education beyond high school? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What have you done and what are your future plans in the way of self-support? \_\_\_\_\_

\_\_\_\_\_

List other scholarships for which you have made application \_\_\_\_\_

List scholarships which you have received \_\_\_\_\_

\_\_\_\_\_  
Student's Signature

The following statements are submitted for the confidential use of the committee in determining need and should be filled out by the parent/guardian.

A. Annual family income (gross, for tax purposes) \_\_\_\_\_

(Less than \$10,000)	(\$10,000 - \$14,999)	(\$15,000 - \$19,999)
(\$20,000 - \$24,999)	(\$25,000 - \$29,999)	(\$30,000 plus)

B. Have you filed the BEOG (Basic Education Opportunity Grant, or FAFSA (Free Application for Federal Student Aid)?  
Yes \_\_\_\_\_ No \_\_\_\_\_

C. State any conditions involving expenses or possible hardships which the committee should take into consideration

\_\_\_\_\_  
Signature of Parent/Guardian

---

---

**Counselor's Certificate**

Student's G.P.A. (On a 4 point scale)

Student's class ranking  
(i. e. 50th out of 100)

ACT/SAT Composite

\_\_\_\_\_  
Do you believe the educational plans of the candidate are realistic? \_\_\_\_\_

\_\_\_\_\_  
Statement or recommendation of counselor \_\_\_\_\_

I have read the statements made by the applicant in his/her formal application for the scholarship and certify they are correct to the best of my knowledge and belief.

\_\_\_\_\_  
Counselor (please print clearly)

\_\_\_\_\_  
School

\_\_\_\_\_  
Counselor's Signature

\_\_\_\_\_  
School Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
School/Guidance Counselor Telephone Number