

Deadline: March 15, 2020

Please mail applications to the Sheriff's office in the county where you reside- a directory can be found at <a href="https://www.ilsheriff.org">www.ilsheriff.org</a>

| Plea | se <b>type</b> or <b>prin</b>  | t your answers                   | . If application | ı is illegible it v | will be retu          | rned to y     | ou.                                  |   |
|------|--|----------------------------------|------------------|---------------------|-----------------------|---------------|--------------------------------------|---|
| 1.   | Last Name:   | First Nar                        |                  |                     |                       |               |                                      |   |
| 2.   | Mailing Address: Street:   |                                  |                  |                     |                       |               |                                      |   |
|      | City:  | County:                          |                  |                     |                       | Sta           | te:                                  | ZIP:                                    |
| 3.   | Daytime Telep  | aytime Telephone Number: ( )     |                  |                     |                       |               |                                      |   |
| 4.   | Date of Birth:   | h: Month Day                     |                  |                     | Year                  |               |                                      |   |
| 5.   | Please make: Email:  | sure this is an e                | email address y  | you check fred      | <mark>quently.</mark> |               |                                      |   |
| 6.   | In the Fall of 2020, I will be attending college as a: (Circle one)  |                                  |                  |                     |                       |               |                                      |   |
|      | Freshman   | Sophomore                        | Junior           | Senior              | Mast                  | er's Leve     | I Technica                           | al School Student                       |
|      | Medical School   | ol Student N                     | Jursing School   | Student (yea        | r                     | _) Oth        | ner:                                 |   |
| 7.   | I will be attending the following ILLINOIS school in the Fall of 2020:   |                                  |                  |                     |                       |               |                                      |   |
|      | Proof of current student enrollment from the above school, in writing, is required by September 15, 2020 IF you are awarded a scholarship! |                                  |                  |                     |                       |               |                                      |   |
| 8.   | Grade Point Average (GPA): (On a 4.0 scale) Attach proof of GPA.   |                                  |                  |                     |                       |               |                                      |   |
| 9.   | ACT Score: Or A copy of your ACT or SAT score sheet is required for incoming college Freshmen only. SAT Score:                             |                                  |                  |                     |                       |               |                                      |   |
| 10.  | Name and city of high school attended:  Year graduated   |                                  |                  |                     |                       |               | ed                                   |   |
| 11.  |  | of any college yot attended coll |                  |                     | Year<br>Began         | Year<br>Ended | Year<br>Graduated<br>(if applicable) | Type of Degree Received (if applicable) |
|      | A.   |                                  |                  |                     |                       |               |                                      |   |
|      | В.   |                                  |                  |                     |                       |               |                                      |   |
|      | C.   |                                  |                  |                     |                       |               |                                      |   |
| 12.  | What specialty   | y/major do you                   | plan to major i  | n as you cont       | inue your (           | education     | ?                                    |   |

| 4.0                       | 111  |  | -1.1.        |                      |                               |                              |  |  |  |  |
|---------------------------|--|--|--------------|----------------------|-------------------------------|------------------------------|--|--|--|--|
| 13.                       |  |  |              |                      |                               |                              |  |  |  |  |
|                           | Α.   | Tuition: Amount: \$  |              |                      |                               |                              |  |  |  |  |
|                           | B.   | Books: Amount: \$  |              |                      |                               |                              |  |  |  |  |
|                           | C.   | Room & Board: Amount: \$   |              |                      |                               |                              |  |  |  |  |
|                           | D.   | Other Expenses:  |              |                      | De                            | escribe below under comments |  |  |  |  |
|                           | E.   | Other Expenses: Amount: \$   |              |                      |                               |                              |  |  |  |  |
| Com                       | Comments:  |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| ļ                         |  |  |              |                      |                               |                              |  |  |  |  |
| 14.                       |  | other financial assistance you will receive per semester or quarter: |              |                      |                               |                              |  |  |  |  |
|                           | A.   | Personal: Amount: \$   |              |                      |                               |                              |  |  |  |  |
| 1                         | B.   | Other Scholarship  | o(s):        | Amount: \$           | Describe below under comments |                              |  |  |  |  |
| 1                         | C.   | Grants:  |              | Amount: \$           |                               | <u></u>                      |  |  |  |  |
| 1                         | D.   | Student Loan(s):   |              | Amount: \$           |                               | и                            |  |  |  |  |
|                           | E.   | Other Financial R  | esource      | s: Amount: \$        |                               | ii                           |  |  |  |  |
| Cor                       | nment  | S:   |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| 15.                       | Do y   | our parents still clai   | m you a      | s a dependent for ta | ax purposes?                  | Yes No                       |  |  |  |  |
| Eath                      | •  | ardian:  | <del>-</del> | <u> </u>             |                               | Annual Income:               |  |  |  |  |
| ratn                      | ei/Gü  | aiulaii.   |              | Employer/Occupat     | IUI1.                         | Annual income:               |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| Add                       | ress:  |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| Moth                      | ner/Gu   | ıardian:   |              | Employer/Occupat     | ion:                          | Annual Income:               |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| Add                       | ress:  |  |              |                      |                               |                              |  |  |  |  |
|                           | 200.   |  |              |                      |                               |                              |  |  |  |  |
| Tota                      | al num   | ther of dependents   | (#claima     | ed on taxes) in hous | sehold including you          | urself:                      |  |  |  |  |
| ı Ola                     | ai iiull   | ibei oi dependents   | (#CIdIII)E   | on laxes) III 110US  | seriola iriciaaling you       | JI JUII.                     |  |  |  |  |
| If vo                     | ou are   | not claimed by you   | ır parent    | s or guardian, then  | complete this section         | on.                          |  |  |  |  |
|                           |  |  | ,            |                      |                               |                              |  |  |  |  |
| YOU                       | ır Ucc   | upation:   |              |                      | Annual Income:                |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| Your Spouse's Occupation: |  |  |              |                      | Annual Income:                |                              |  |  |  |  |
| •                         |  |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      | <u> </u>                      |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| lse an                    | addit  | ional sheet if you ne  | ed more      | room to list financi | al information reque          | ested in items 13 & 14.      |  |  |  |  |
| wi                        |  |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
| 16.                       | 16. What are your educational and professional goals and objectives? (You can attach your resume if it has |  |              |                      |                               |                              |  |  |  |  |
|                           | this information.)   |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |
|                           |  |  |              |                      |                               |                              |  |  |  |  |

List your academic honors, awards and membership activities while in high school or college: (You can attach your resume if it has this information.)

17.

| 18.    | List your community service activities, hobbies, outside interests, and extracurricular activities: (You can attach your resume if it has this information.)   |
|--------|--|
|        |  |
|        |  |
|        |  |
| 19.    | If selected as a Scholarship winner may ISA publish your name and/or picture as a scholarship recipient?  Yes  No  |
|        |  |
|        |  |
|        | **ESSAY QUESTION: (please attach your essay) **  |
|        | Over the last few years law enforcement, especially Sheriff's office's, have experienced a ne in applicants for job of police officer. How do we as Sheriff's increase the number of icants from the youth of today?               |
|        | REMEMBER to submit your essay of 350 words or less with your application.  |
|        | STATEMENT OF ACCURACY  |
| also c | by affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I onsent that my picture may be taken and used for any purpose deemed necessary to promote the ISA arship program. |
| Signa  | ture of scholarship applicant: Date:   |
|        | REMEMBER   |
| The d  | eadline for this application to be received is March 15, 2020!! Remember all applications  |
|        | to be submitted to the Sheriff's Office in your County, DO NOT SUBMIT  |
| TO:    | THE ISA You can find a directory of Sheriff's Office addresses on our  |

PLEASE READ THE INFORMATIONAL PACKET THAT FOLLOWS.

website www.ilsheriff.org



# Illinois Sheriffs' Association

## \$500 Scholarship

The Illinois Sheriffs' Association will be awarding over 100 scholarships throughout the State of Illinois to students wishing to pursue higher education during the 2020-2021 academic year. The student must be enrolled full-time at a certified institution of higher learning within the State of Illinois.

### **Eligibility**

There shall be no restriction on any applicant by reason of race, age, creed, color, sex or national origin. The only limitations are the following:

Applicants must be permanent Illinois residents.

Scholarships are to be utilized at institutions of higher learning within the State of Illinois.

Students must be enrolled as a **full-time** student during the 2020-2021 school year (excluding summer session).

Please read the following very carefully. Failure to comply with the rules could result in disqualification.

#### How to Apply

Applications are available at local sheriff's offices or the internet at <a href="www.ilsheriff.org">www.ilsheriff.org</a> Fill out the application, complete the written essay and return all documentation to the sheriff's office in the county of your permanent residence by March 15, 2020 (must be postmarked by this date).

Do not send completed applications to the ISA Office! YOU MUST MAIL THEM TO THE SHERIFF'S OFFICE OF THE COUNTY IN WHICH YOU RESIDE!

#### Distribution of Monies

The scholarship funds will be paid **directly** to the school on behalf of the recipient. The total scholarship award will be divided as follows: 1/2 credited to the fall semester and 1/2 credited to the spring semester. *Funds cannot be used for summer courses and must be used during the 2020-2021 academic year*.

The recipient must instruct the school he/she is attending to notify the ISA office with written notification of full-time enrollment status before any scholarships will be paid. The ISA office must be contacted by the school, in writing, before September 15, 2020. EMAIL: TERI SCHROEDER AT TERI@ILSHERIFF.ORG

#### **Deadlines**

The deadline for all application submissions to the **applicant's permanent county Sheriff's** office is **March 15, 2020. If you are awarded a scholarship: the ISA office must be contacted** by the school with written enrollment verification before **September 15, 2020**, or **scholarship checks will** *not* **be issued and your scholarship will be awarded to the first alternate.** 

IMPORTANT NOTICE: ISA scholarship funds are intended to assist students with the cost of tuition, books and fees. No funds can be used for housing or any other incurred expenses. Funds must be used during the regular school year and cannot be used for summer courses. Books must be purchased from a learning institution campus bookstore and directly billed through that institution's bursar's office. If tuition is paid in full by any other scholarship, grant or other financial aid the ISA scholarship cannot be used to reduce the other funding.

### Illinois Sheriffs' Association Scholarship Program Guidelines

The Illinois Sheriffs' Association plans to award at least 100 scholarships of a minimum \$500 during the 2020-2021 academic year. This effort is a meaningful expression of the Association's confidence in, and respect for, education and training.

The Association's goal is to provide assistance to worthy students in furthering their education and training with resources made available through the Associate Membership Program of the Illinois Sheriffs' Association. Illinois sheriffs consider this scholarship program to be an investment in the future which will provide for better communications with the residents of the communities served.

The sum of \$58,500.00 has been allocated from the 2020 budget to carry on the program for the 2020-2021 academic year. The scholarship will be awarded statewide with distribution based on the number of Associate Members in participating counties. One scholarship will be provided for each county with an Associate membership (1-500 members). One additional scholarship will be awarded per every 500 Associate Members in the county. Scholarships will only be awarded in counties where the sheriff has authorized the Associate Membership Program.

Scholarship funds are intended to assist students with the cost of tuition, fees and books only. No

funds can be used for housing or any other incurred expenses. If a lesser amount (less than \$500) covers all tuition, books and fees required of the student chosen, that lesser amount will be awarded.

The scholarship funds will be paid directly to the school on behalf of the recipient with the instructions that 1/2 is to be credited to the fall semester and 1/2 to the spring semester. However, books must be purchased from the learning institution's campus bookstore and directly billed through the institution's bursar's office.

Funds cannot be used for summer courses and must be used during the regular 2020-2021 school year. The recipient is responsible for having the school notify the ISA office with written verification of full-time enrollment before any scholarship funds will be paid. The ISA must be contacted by the school, in writing, before September 15, 2020. If this deadline is not met, the scholarship will be forfeited. THERE WILL BE NO EXCEPTIONS. There shall be no restriction on any applicant by reason of race, age, creed, color, sex or national origin. The only limitations are the following:

- 1) Applicants must be permanent Illinois residents.
- 2) Scholarships are to be utilized at institutions of higher learning within Illinois.
- 3) Students must be enrolled as full-time students for 2020-2021.

Only the immediate family of the sheriff is ineligible to apply. Families of sheriff's office employees are eligible to make application.

Completed applications shall be submitted to the **Sheriff of the county** of the applicant's permanent Illinois residence by the **March 15, 2020** deadline. **A Sheriffs' directory is available on our Web Site**. <a href="www.ilsheriff.org">www.ilsheriff.org</a> Applicants must be eligible for admission to the school indicated on the application. The award will only be paid for attendance to **certified schools within the State of Illinois**.

Applications received in the sheriff's office on or before **March 15**, **2020** are to be reviewed by a committee of nonpartisan citizens selected by the sheriff. That committee of citizens will review, evaluate and select the winner(s) and two alternates to represent their county.

## The names of ALL scholarship winners will be announced by May 1, 2020 and notified in writing by the ISA.

Those who receive scholarships during an academic year may apply again in another year. However, such applicants will be considered along with all others who apply in the county. If for any reason, a recipient relinquishes a scholarship, that scholarship will be granted to an alternate from the same county which was selected by the local committee.

\*\*\*NOTE: All applications need to be submitted to your permanent residence Sheriff's Office. DO NOT SEND TO THE ISA! \*\*\* You can find a directory of Sheriff's Offices on our website: www.ilsheriff.org