

SCHOLARSHIP APPLICATION This application is used for the Fraternal Order of Police Lodge #6 Scholarship.

1.	Date of application:	School:	:			
2.	Name:(First)	(Middle)_		(Last)		
3.	Home Phone: Cell Phone:					
4.	Address:(Street)	_(City)		(State)	(Zip)	
5.	Social Security Number:	ACT Score:				
6.	Name of parent or guardian:					
7.	Where do you plan to attend college:Current Student at above college: Yes					
	a. Address: (Street)					
	(City)		_(State)	(Zip)		
	(Phone)	(Fir	nancial Aid Offi	ce Phone)		
8.	Have you applied for admission YES	_ NO	Have you bee	n accepted YES_	NO	
9.	Applying for the FOP scholarship for the (Fall/Spring)Semester.					
10.). What is the projected cost to complete your education:					
11.	11. How do you plan on financing your education:					
12.	Do you plan on working during the school year: During the summers:					
13.	Employment: Employer	Position		Γ	ates	

Club/Organizations	
Elected offices/Leadership positions	
Community/Church/Cultural activities	
Honors/Awards. This may include honors and awards rece	ived outside of High School
I understand that failure to meet any of the criteria will disquali I also state that all information provided in this application is ac I also understand that the money is to be used towards schoolbo	ccurate.
Student Signature	Date
Application Deadline: April 1 st . Return completed application to: Fraternal Order of Police Lodge #6 Attn: President	

Attn: President

119 S. Maple

Watertown, SD 57201 Phone: (605) 882-6210