## **KENTUCKY STATE POLICE**

## TROOPER ISLAND SCHOLARSHIP PROGRAM APPLICATION

SECTION A: STUDENT INFORMATION	N	
FEMALE: MALE:		
APPLICANT NAME:First	Middle	Last
1 1131	Wildelic	Lasi
ADDRESS:		
CITY:	STATE:	ZIP CODE:
DATE OF BIRTH:	SOCIAL SECURITY NUMBER:	
E-MAIL ADDRESS:		
PHONE NUMBER:	CELL NUMBER:	
HIGH SCHOOL NAME:	PHONE NU	JMBER:
HIGH SCHOOL CITY:	STATE:	ZIP CODE:
HIGH SCHOOL GPA:	HIGH SCHOOL GRADUATION	DATE:
COLLEGE OR TECHNICAL/VOCATIONAL S TO APPLY:  LIST YOUR COMMUNITY SERVICE ACTIVI EXTRACURRICULAR ACTIVITIES:	ITIES, HOBBIES, OUTSIDE INTE	
SECTION B: TROOPER ISLAND INFORMA	ATION	
HAVE YOU EVER ATTENDED TROOPER ISLAND CAMP? YEAR ATTENDED:		
WHAT KSP POST DID YOU ATTEND WITH	?	
AWARDS RECEIVED AT CAMP:		

## **SECTION C: FINANCIAL INFORMATION**

LIST ALL FINANCIAL RESOURCES FOR THE PERIOD OF JANUARY 1 - DECEMBER 31.

1.	Wages, salaries, tips (gross Income - before taxes)		
	Do not include work study earnings	\$	
2.	Other taxable income (interest, dividends, etc.)	\$	
3.	Social Security Benefits	\$	
4.	Veterans Administration Benefits	\$	
5.	Aid to families with dependent children (AFDC)	\$	
6.	Other scholarship(s)	\$	
7.	Grant(s)	\$	
8.	Student loan(s)	\$	
9.	Other financial resourcers	\$	
10.	Parent(s)/legal guardian(s) income	\$	
	TOTAL AMOUNT \$		

- 1. The following items must be attached to this application in order for the application to qualify to be reviewed by the shcolarship committee.
- 2. Your application will be returned to you if these items are not attached to this application. (no exceptions)
- 3. Circle "YES" OR "NO" to be sure you have attached each item as required.

YES	NO	Completed, signed application form [this form]
YES	NO	Two (2) character reference letters (non-family member with only one allowed
		from teacher or school official.
YES	NO	Personal essay to include information about your career goals and why you feel
		you should receive this scholarship.
YES	NO	Proof of enrollment/registration for upcoming fall semester

## STATEMENT OF ACCURACY

I hereby affirm that all the above information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote Kentucky State Police Trooper Island Scholarship Program.

I hereby understand that if chosen as a scholarship winner, according to Kentucky State Police Trooper Island Scholarship policy, I must provide evidence of enrollment/registration at an accredited, post-seconday institution in Kentucky before my scholarship funds can be awarded.

SIGNATURE OF SCHOLARSHIP APPLICANT	SIGNATURE OF PARENT/ LEGAL GUARDIAN
DATE:	DATE:

**Please Mail Scholarship Application To:** 

Kentucky State Police Attn: Lucille Marshall 919 Versailles Road Frankfort, KY 40601