

FPOA SCHOLARSHIP APPLICATION

Mail to: FPOA Scholarship Fund *P.O. Box 2263* Frisco, TX 75034
For More Information Contact a Board Member

This application must be included with submission.

Student Information: *(Please print or type)*

Name (First, Middle Initial, Last): _____

Home Address: _____

City: _____ State: _____ ZIP _____

Home Phone: (____) _____ SS Number: _____

Date of Birth: _____ High School Attended: _____

Location: _____ Year Graduated/GED Granted: _____

High School Class Standing (Rank): _____ Out of Possible: _____ GPA: _____

FPOA Member Information:

Name (First, Middle Initial, Last): _____

Job Title: _____ Division: _____

Must Include With Application:

- Current Complete Official High School Transcript or GED Certification** (with EVERY application submission)
- Current Complete Official College Transcript** - (if applicable) including the most recent semester completed
- Awards and Honors** - attendance, citizenship, contests, sports, etc.
- Community/Extracurricular Activities** - indicate grade and number of years involved
- Work History** - summer and/or part time, volunteer; indicate number of hours worked
- Recent Photograph** - a non-returnable, wallet size photo for use only in featuring recipients in newsletter
Note: photographs will not be submitted to the selection committee and are in no way part of the selection process
- Statement Regarding Career and Education Goals**

I hereby attest that all of the information given is accurate and truthful.

Signature: _____ **Date:** _____