## 2024

## Indiana State Fraternal Order of Police

## State Lodge Scholarship Program

Dear Members and Scholarship Applicants,

On behalf of the Indiana State FOP Scholarship Committee, welcome to the scholarship application process and thank you for your interest. We encourage you to read and follow all of the directions, so the application does not get disqualified.

Congratulations on your commitment to pursue a secondary education that is so important in the 21<sup>st</sup> century. We wish all the applicants the best of luck in their educational endeavors.

Fraternally,

The Indiana State FOP Scholarship Committee

The Indiana State Fraternal Order of Police will award a number of scholarships to each District (Northwest, Northeast, Central, Southwest, and Southeast) based on 10% of the District's total active membership with a maximum number not to exceed twenty. These scholarships will be awarded annually at the State Conference. The Indiana State Fraternal Order of Police Executive Board reserves the right to modify the number of awards based on available funds.

All applicants must be an immediate relative (son, daughter, stepson, or stepdaughter) of an active Indiana FOP member.

All applications will be judged and selected by a committee appointed by the Indiana State FOP Executive Board. The committee is the only authority to review and select applications and their decisions are final.

All applications will be judged by the applicable criteria, regardless of sex, race, or religion.

All applications must precede the applicants 22<sup>nd</sup> birthday. The award is open to any secondary education program from any accredited institution. This includes but is not limited to online education and technical schools. Award winner is ineligible to receive awards two years consecutively. They must allow for a year to pass before reapplying. The maximum number of scholarships a single person can receive from this program is two.

All applications must be legible.

The scholarship award is to be used for furthering student's education. Should the student decide not to attend an accredited institution it will be the responsibility of the FOP member and the student to notify the Scholarship Committee. They shall return the distributed funds to the Indiana State FOP.

Each applicant must submit the following for consideration in order to be eligible for a scholarship award:

- 1. A completed scholarship application form.
- 2. Most recent transcript (high school or college) indicating a GPA of 3.0 or 4.0 scale. If your educational institution scores on a different scale, please provided an explanation or translation of that score to the scale requested.
- 3. A copy of SAT or PSAT scores
- 4. A minimum 250 actual word type written essay indicating scholastic accomplishments, extracurricular involvement, and educational intentions and career plans

All applications must be mailed and postmarked by March 1, 2024.

Hand delivered applications will not be accepted.

Mail Completed application to: Indiana State Lodge F.O.P.

Michael Cook, Secretary 1427 E. Washington St. Indianapolis, IN 46201

## Indiana State Fraternal Order of Police Scholarship Application

Name	Date of Birth		
Address			
City			
E-Mail	Phone		
FOP Member Name	FOP Membe	rship No	
FOP Lodge #			
Relationship/Police Agency			
Father's name and address			
Mother's name and address			
Occupation of Parent(s) or Guardian(s)	·	, in the second	
Number and Ages of Siblings			
High School Attended			
Date of High School Graduation	Current G.P.	A	
Major Studies/Reasons For			
Name/location of College if enrolled			

Major(s) and Minor(s) in College	
Collective SAT or PSAT Score	Combined ACT Store
Are you Currently Employed?	_ If yes, Hrs. Worked per Week
Extra-Curricular Activities (In and Ou	ut of School)
List Any Awards You Have Received	1
Have You Received a Scholarship fro	
List Any Scholarships/Grants for Whi	ich You Have Applied
List Schools to Which You Have App	blied
	n Accepted

I understand that failure to follow the rules and regulations or failure to provided	
requested information may be cause for disqualification from this program. I	
affirm that all the information provided on this application and attachments are	
true and accurate to the best of my knowledge.	
Signature Date	