



# BROWN COUNTY SHERIFF'S OFFICE MEMORIAL SCHOLARSHIP



*"Dedicated to those who have given the ultimate sacrifice in the line of duty"*

To be considered for this one time, \$1000.00 scholarship you must fill out this form **completely** including essay and letters of reference.

STUDENTS FULL NAME: \_\_\_\_\_ CLASS RANK \_\_\_\_\_

GRADE POINT AVERAGE (GPA) \_\_\_\_\_

## I. PERSONAL INFORMATION

Address \_\_\_\_\_, City \_\_\_\_\_

Address of parent/guardian if different from above: \_\_\_\_\_

Are you currently certified in First Aid/CPR and AED?  YES  NO

How many people are supported by your parents/guardian? Include parents in number \_\_\_\_\_

How many people in your family will be in college or other special training next year? \_\_\_\_\_

Parents'/Guardians' Occupations:

Mother: \_\_\_\_\_

Father: \_\_\_\_\_

Your present occupation (if employed)? \_\_\_\_\_

If you are employed, how many hours a week do you work? \_\_\_\_\_

## II. COLLEGE INFORMATION:

Please list the university, college or vocational school you have chosen to attend: \_\_\_\_\_

Have you been accepted to this school?  YES  NO If you are still undecided, list the schools to which you have applied. \_\_\_\_\_

Have you taken any college classes while attending high school?  YES  NO

If so list classes: \_\_\_\_\_

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## **III. ESSAY**

The essay gives scholarship donors an opportunity to get to know you by the way you address the topic. Attach a typed, double-spaced essay of 300 to 500 words on one of the following subjects:

- 1. The advantages of living in Brown County**
- 2. The importance of giving back to your community**
- 3. My chosen profession**
- 4. Why I want to attend college and how receipt of this scholarship will help me realize my goals.**

## **IV. ACTIVITIES SHEET**

On a separate sheet of paper, list all school and community activities in which you have participated during your high school years. Please list any awards, certificates or achievements attained.

## **V. REFERENCES**

Please provide 3 letters of reference from individuals (Not family members) who have known you. Please use the attached sheets to provide to references for their use.

**APPLICATION MUST BE RETURNED TO  
SCHOOL COUNSELOR BY APRIL 18, 2016 AT  
4:00PM.**

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## LETTER OF REFERENCE

(To be completed by each reference provided)

Name of reference: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone/Cell #: \_\_\_\_\_

Person you are recommending: \_\_\_\_\_

1. How long have you known this person? \_\_\_\_\_

2. How will this scholarship benefit the student? \_\_\_\_\_

\_\_\_\_\_  
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\_\_\_\_\_

3. Additional comments: \_\_\_\_\_

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Signed: \_\_\_\_\_

Date: \_\_\_\_\_