

APPLICATION

CMPD OFFICERS CLARK AND SHELTON SCHOLARSHIP AWARDS PROGRAM FOR 2017



SPONSORED BY:
GREATER CHARLOTTE AUTOMOBILE DEALERS ASSOCIATION AND
CHARLOTTE'S FINEST LEGACY FOUNDATION

EOW: 4.1.07

CMPD OFFICERS CLARK AND SHELTON SCHOLARSHIP GUIDELINES

1. Two \$2,500 scholarships will be awarded annually to two eligible high school students who wish to pursue a career in law enforcement.
2. Applicants should have be a resident of the following within:

ELIGIBLE COUNTIES:

Mecklenburg County
Stanly County
Lincoln County

3. Children of officers/directors of the Charlotte's Finest Legacy Foundation are not eligible for scholarship awards.

APPLICANT INFORMATION

Name of Applicant: _____

Address: _____

County: _____

Home Phone Number: _____

Cell Phone Number: _____

Email Address: _____

EDUCATIONAL BACKGROUND

Current High School/College: _____

Date of Graduation: _____

Where have you applied for your post high school education? _____

Attach a copy of current high school or college transcript.

Attach a copy of college admission acceptance letter.

FAMILY MEMBER INFORMATION

If applicable, provide the requested information on your relative who is employed by a law enforcement agency.

Name: _____

Relationship: _____

Email Address: _____

Name of Law Enforcement Agency: _____

Position Held: _____

Length of Employment: _____

If you do not have an immediate family member employed at a law enforcement agency, this is your opportunity to tell the committee your personal reason as to why you deserve to be awarded this scholarship.

Attach a separate sheet if additional space is required.

REFERENCES

Attach sealed letter of reference, no limit on wording. Please read descriptions below; submit one educator and one personal reference.

Give full name, address, email address and phone number of **one educator** who has taught you during the past four years.

Reference Name: _____

Address: _____

Name of School: _____

Phone Number: _____

Email Address: _____

Give full name, address, email address and phone number of **one other person not related to you**. Please attach their sealed letter of reference, no limit on wording.

Reference Name: _____

Address: _____

Name of School: _____

Phone Number: _____

Email Address: _____

ACTIVITIES AND INTERESTS

Please list any activities in and out of school which you feel are pertinent to this application.

Start with your most recent activities and work backwards.

Consider this your opportunity to share information with the Scholarship Committee that is not specified anywhere else on the application.

Attach a separate sheet if additional space is required.

ESSAY

THIN BLUE LINE REASON

Why do you want to be a police officer?

Attach a separate sheet if additional space is required.

Signature of Applicant_____

Date_____

IMPORTANT ADDITIONAL SCHOLARSHIP INFORMATION

1. Scholarship applications must be received in the listed P.O. Box by April 30, 2017.
2. Scholarships will be awarded at the CMPD Awards Ceremony during National Police Week In May.
3. A scholarship committee consisting of Sherry Clark, Jennifer Shelton and three Charlotte's Finest Legacy Foundation members will select and present the annual awards.
4. For questions regarding the application, please contact Jennifer Shelton at jshelton2884@gmail.com or Sergeant Susan Manassah at smanassah@cmpd.org.

Please mail complete application to:

CHARLOTTE'S FINEST LEGACY FOUNDATION
P.O. BOX 34742
CHARLOTTE, NC 28234