

**Application for Scholarship
Stanislaus County Peace Officer's Association
Scholarship Committee
P.O. Box 3471 Modesto CA 95353**

NAME: _____

ADDRESS: _____

TELEPHONE: _____ DOB: _____

AFFILIATION WITH SCPOA: _____

EDUCATIONAL BACKGROUND:

HIGH SCHOOL: _____

YEAR GRADUATED: _____ GPA: _____ MAJOR: _____

COLLEGE (S) ATTENDED:

_____ MAJOR: _____

_____ MAJOR: _____

**A COPY OF YOUR LATEST TRANSCRIPT MUST ACCOMPANY
THIS APPLICATION.**

**MY INTENDED MAJOR COURSE OF STUDY AND COLLEGE
IS/OR WILL BE:**

SIGNATURE: _____ DATE: _____

**Please use the reverse side of this form to explain why you are applying
for this Scholarship and how it will benefit you in pursuing your
educational goals.**