Loudoun County Deputy Sheriff's Association Scholarship

(Number and Amount to be Determined)

Due to the closure of Loudoun County Public Schools through the end of the Academic Year, application packets SHOULD NOT be sent directly to your Career Center Assistant. Completed application packets should be received or postmarked by the below deadline and either mailed or emailed to the contact below.

Criteria:	Graduating Senior from a Loudoun County High School				
	Intends to pursue a degree in law enforcement or public service-related field Academic and extracurricular performance, achievements, community service and leadership in high school				
Financial Need:	Incial Need: FAFSA or SAR Required				
Selection:	ection: Recipients will be selected by the LCDSA Scholarship Committee				
Deadline:	ne: April 9, 2021				
Contact:	Loudoun County Sheriff's Office Attn: Ms. Audra Vogel PO Box 7200 Leesburg, VA 20177				

For questions, please call (571) 258-3049 or email Audra.Vogel@loudoun.gov

LOUDOUN COUNTY DEPUTY SHERIFF'S ASSOCIATION SCHOLARSHIP

APPLICATION FORM

Please complete in blue or black ink or typed. Additional pages may be attached.

A transcript is available from your school counseling office and must be attached to this application. If you are unable to obtain a transcript from your Counselor, please provide their contact information below. This will not necessarily exclude you from being awarded a scholarship for 2021.

Applicant's Full Name_____

Date of Birth_____Phone_____

Parent(s) or Guardian(s)

Address

Accepted by (colleges or universities)

(To be filled in by counselor): Class Rank_____ GPA_____ If you are unable to obtain this information from your Counselor, please provide their contact information. This will not necessarily exclude you from being awarded a scholarship for 2021.

Counselor Name: _____ Email _____

Extra-curricular Activities (include number of years and offices held)

Community Activities (include number of years and offices held)

Please reply to the following questions in essay form. Use the other side of this sheet if necessary.

Describe your planned course of studies and educational goals and tell why you have selected this field:

Explain why you need and will benefit from this scholarship:

FINANCIAL STATEMENT

I. Student Employment (Includes full or part-time during the last two years):

	Employer	Type of Work		Employed From To	Weekly Earning	
	Amount you have	saved toward higher educ	ation			
II. Fa	mily Income	Occi	pation			Annual Income
	Father Mother *Other		pation	-		
				Total Fa	amily Income	
III. Es	investment incom	(Free Application for Fed tion.				nembers, or eport) must be submitted
	Tuition & Fees Room & Board Books & Supplies Medical, incl. Inst			Transportation Clothing Laundry Other Total Es		
IV. Ex	xpected Financial R	desources (per year):				
	From Family From Earnings *From other Source			From Other Scho From Contributio	ons	
	*Specify by sourc	e, such as trust funds, insu	irance, etc		xpected Resources	·
V. Ot	her Dependents in l	Family				
	Name		Age	If stude	nt, name of school	
I/We d knowle		on in this application and f	inancial s	tatement to be tru	e and accurate, to	the best of my/our
Signat	ure of Student			Signatu	re of Parent(s) or G	Guardian(s)
I autho	orize the release of tra	anscript to the Scholarship	o Committ	ee so that he/she	may be considered	d for this scholarship.
Signat	ure of Student		e	Signature of Pare	ent if student is	Date

Signature of Student

Date

Signature of Parent if student is under 18 years of age

Date