



**HERO 320 Scholarship Details:**

1. Scholarships at this time are being awarded to those pursuing EMT certification or a degree in Fire Science.
2. Candidate must be a high school graduate or have a GED at the time the scholarship monies are awarded.
3. Candidate must be at least 18 years of age at start of their program.
4. Selection for scholarships will be made by the HERO 320 Awards Committee and based on the following:
  - a. Grade point average must be a minimum of 2.5
  - b. Completed application questions
  - c. Letters of recommendation
5. Scholarship monies awarded will be distributed directly to the educational institution.

**Each completed application is to be submitted with:**

1. Completed application
2. Two (2) CURRENT signed letters of recommendation from persons other than a relative – must know the applicant for more than 2 years.
3. For applicants not yet accepted to a program: high school transcript (college transcript if applicable) and diploma or copy of GED.
4. For applicants already accepted to a program: copy of acceptance letter.

Email your submissions to [hero320scholar@gmail.com](mailto:hero320scholar@gmail.com) and include "HERO 320 Application" in the subject line. An acknowledgement of receipt will be sent to you shortly after your email is received.



Name:

Address:

Phone Number:

Email Address:

Name and address of High School:

Date of Graduation/GED:

Name and address of University or College attended:

Please provide your answers for the following questions in the space provided.

How will the HERO 320 scholarship benefit you?



How will receiving the HERO 320 scholarship benefit your community?

What led you to want to be an EMT or study Fire Science?



Where do you see yourself professionally 5 years from now?

**Acknowledgment and Signature:**

- I certify that the information provided is complete and accurate to the best of my knowledge
- I hereby give consent to the HERO 320 Awards Committee, its agents, or designees to verify the contents of this application with any individual, government, educational institution or other entity.
- I understand that the HERO 320 Awards Committee may request additional information
- I agree to share and allow the release and publication of my name, photo and likeness and give my permission for the HERO 320 Awards Committee to share this information for the purpose of recruitment or public relations
- I acknowledge that it is my responsibility to keep the HERO 320 Awards Committee informed of any address or contact information changes
- I understand that all application material becomes the property of the HERO 320 Awards Committee and cannot be returned

I certify that I have read this application and I accept all the conditions herein

Print Name:

Signature:

Date: