

# Kentucky State Police Professional Association

633 Chamberlin Avenue

Frankfort, KY 40601

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## 2017 SCHOLARSHIP APPLICATION

DISTRICT \_\_\_\_\_ KSPPA MEMBER # \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_

APPLICANT'S ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ WORK # \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_ GPA \_\_\_\_\_

COLLEGE \_\_\_\_\_ GRADE \_\_\_\_\_

KSPPA MEMBER NAME \_\_\_\_\_ TITLE \_\_\_\_\_

ASSIGNMENT \_\_\_\_\_ PHONE: (WORK) \_\_\_\_\_ (HOME) \_\_\_\_\_

HAVE YOU RECEIVED A KSPPA SCHOLARSHIP BEFORE? YES \_\_\_\_\_ NO \_\_\_\_\_

HAS ANYONE IN YOUR FAMILY RECEIVED A KSPPA SCHOLARSHIP? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, WHO? \_\_\_\_\_

COMMENTS \_\_\_\_\_

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I HEREBY STATE THE ABOVE ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

MEMBER \_\_\_\_\_ APPLICANT \_\_\_\_\_

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**PLEASE READ INSTRUCTIONS ON THE REVERSE SIDE AND ATTACH ALL ITEMS.**

FOR OFFICE USE ONLY:

MEMBER IN GOOD STANDING \_\_\_\_\_ # OF YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_

DISTRICT/POST \_\_\_\_\_ MEMBERSHIP # \_\_\_\_\_

RELATION TO MEMBER (A) BLOOD \_\_\_\_\_ (B) MARRIAGE \_\_\_\_\_ (C) OTHER \_\_\_\_\_

## **QUALIFICATIONS FOR ELIGIBILITY TO RECEIVE SCHOLARSHIP**

1. YOU MUST BE A BONA FIDE DEPENDENT CHILD OF AN ACTIVE MEMBER OR RETIRED LIFETIME PAYING MEMBER OR A DECEASED MEMBER OF THE KSPPA. (MEMBER MUST BE OR HAVE BEEN IN GOOD STANDING FOR A MINIMUM OF 60 CONSECUTIVE MONTHS).
2. YOU MUST SHOW PROOF THAT YOU HAVE BEEN ACCEPTED BY AN **ACCREDITED** COLLEGE OR UNIVERSITY.
3. YOU MUST ATTACH PROOF OF A 2.0 GRADE POINT AVERAGE.
4. YOU MUST BE A HIGH SCHOOL SENIOR, A COLLEGE FRESHMAN, SOPHMORE OR JUNIOR.
5. YOU MUST NOT HAVE BEEN A PRIOR RECIPIENT OF THE KSPPA SCHOLARSHIP.
6. YOU MUST BE A FULL TIME STUDENT.
7. A CURRENT PHOTO MUST BE INCLUDED WITH YOUR APPLICATION SUITABLE FOR PUBLICATION. (YOUR SENIOR PICTURE WOULD BE PERFECT.)

### PROCEDURE:

1. **YOU MUST COMPLETE AND MAIL THE ATTACHED APPLICATION. THE APPLICATION MUST BE RECEIVED AT THE KSPPA OFFICE ON OR BEFORE FRIDAY, MAY 12, 2017. ANY APPLICATION RECEIVED AFTER THIS DATE WILL NOT BE ACCEPTED.**
2. APPLICATIONS MUST BE MAILED TO:  
  
KSPPA  
633 CHAMBERLIN AVENUE  
FRANKFORT, KY. 40601
3. THE APPLICATION WILL BE PRESENTED TO THE KSPPA BOARD OF DIRECTORS FOR THEIR APPROVAL.
4. AFTER THE EXECUTIVE BOARD MEETS AND APPROVES THE SCHOLARSHIP APPLICATIONS, YOU WILL RECEIVE INFORMATION REGARDING THE AWARD OR NON-AWARD OF THE SCHOLARSHIP WITHIN 14 DAYS OF BOARD ACTION. IF YOU DO NOT RECEIVE NOTIFICATION, PLEASE CONTACT THE ASSOCIATION AT 502-875-1625.
5. ALL SCHOLARSHIP CHECKS WILL BE MADE PAYABLE TO THE MEMBER WHOSE CHILD HAS BEEN AWARDED A SCHOLARSHIP. THE AMOUNT TO BE AWARDED TO THOSE APPLICANTS MEETING THE CRITERIA SHALL BE \$1000.00 IN 4 EQUAL AWARDS OF \$250.00 PER YEAR PAYABLE AFTER THE SPRING SEMESTER. THESE SCHOLARSHIPS WILL BE DISTRIBUTED AT THE KSPPA OFFICE IN FRANKFORT.
6. A LETTER MUST BE SENT BY THE MEMBER TO CERTIFY THAT THE CHILD IS CONTINUING HIS/HER EDUCATION AND THE NEXT INSTALLMENT WILL BE PAID. SHOULD A CHILD DROP OUT OF COLLEGE FOR ANY REASON THE AWARD IS NOT PAYABLE. IF THE MEMBER WISHES TO RESUME THE SCHOLARSHIP AWARD AFTER THE CHILD HAS RETURNED TO COLLEGE, THE MEMBER MUST SUBMIT A LETTER TO THE TREASURER WHO WILL PRESENT IT TO THE BOARD OF DIRECTORS FOR APPROVAL.