FPOA SCHOLARSHIP APPLICATION

PLACE ALL COMPLETED APPLICATIONS IN CANDY PEREZ'S PD MAILBOX.

For More Information Contact a Board Member: board@friscopoa.com

This application must be included with submission.			
Student Information	l: (Please print or type)		
Name (First, Middle Initial	l, Last):		
Home Address:			
City:	State:	ZIP	
	SS Number:		
	High School Attended:		
Location:Year Graduated/GED Granted:			
High School Class Standin	g (Rank):O	out of Possible:	GPA:
FPOA Member In	formation:		
Name (First, Middle Initial	l, Last):		
Job Title:	Division:		
 Current Complete History - Completed Awards and Honors Community/Extracut Work History - summer Recent Photograph - newsletter Note: photographs will not process. Statement Regarding 	igh School Transcript ollege Transcript - (iff attendance, citizenship, corricular Activities - in er and/or part time, volunted a non-returnable, wallet sit to be submitted to the select	ot or GED Certifical applicable) including the recontests, sports, etc. Indicate grade and number eer; indicate number of lize photo for use only in the cition committee and are in	most recent semester er of years involved nours worked
I hereby attest t	that all the informatio	on given is accurate	and truthful.
Signature:		_Date:	