

Florida Sheriff's Explorers Associaton

Basic Law Enforcement Academy Scholarship



APPLICATION

Personal Information

Name _____

Date of Birth _____ Age _____

Address _____

Home Phone _____ Cell Phone _____

Agency Information

Full name of Sponsoring Agency _____

Post name and number _____

Agency Address _____

Senior Advisor's name and rank _____

Senior Advisor's phone number _____

Leadership Experience

Please list any positions held, the length of office, any responsibilities that were put upon you and any significant accomplishments during that time. Also, please list any experiences, whether you were holding a position of office or not, that have demonstrated your leadership skills and abilities.

For Exploring

POSITION HELD:	TERM OF EACH POSITION:

Accomplishments: _____

Awards and Recognition

- Please List any awards or recognition that were a result of your assistance or of your direct leadership in regards to you as an Explorer:
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Information that you must attach with your application:

- Please attach a copy of the results of the CJBAT and the name, address, and phone number of the academy that you are applying for.
- Also, please attach a **2-page** essay describing your goals in law enforcement and why you should be picked for the scholarship. The essay should be as followed:
 - **2 pages**
 - **Typed**
 - **Font size 12**
 - **Times New Roman Type**
 - **Double Spaced**

***Please make note that to put in for this scholarship the applicant must be of age to attend an academy and must be graduating high school or in college. The applicant must take the CJBAT before applying.**

- **Certifications**

Certification by Explorer

- I certify that the foregoing facts are accurate to the best of my knowledge. If selected for this scholarship, I agree to use 100% of the awarded funds to attend any certified Law Enforcement Academy within the State of Florida. These funds will be used within 12 months from the date the scholarship is awarded.

Date_____ Explorer Signature_____

Certification by the Post

- The above-named applicant is approved by Post number_____ and is qualified for the Florida Sheriff's Explorers Association Basic Law Enforcement Academy Scholarship

Date_____ Advisor's Signature_____

SELECTION COMMITTEE APPROVAL

Date received by committee and signature _____

Nomination accepted as recipient _____ Date _____

Nomination rejected as recipient _____ Date _____

Committee Chairman's Signature: _____