Northern Colorado Lodge #3 of the Colorado Fraternal Order of Police has established an annual scholarship fund. The fund will be established each year at the discretion of the Executive board. Scholarships MAY be awarded each spring.

1. This form can be edited as a Word document, (please e-mail [fop3@outlook.com](mailto:fop3@outlook.com)) for any questions regarding this application.
   1. You may print this form and hand write in all the required information, or
   2. You can edit the document then print it.
2. All applicants must be a member in good standing, or a dependent of a Lodge #3 member(s) who are in good standing, or an individual who has been sponsored by a member in good standing.
3. Applications will be available at the January meeting of the Lodge and completed applications are due by March 1st. Postmarks shall be the deciding factor for date of submission**. All applications should be mailed attention FOP Lodge #3, to 383 W Drake Rd Suite 202 Fort Collins, Colorado 80526**. Applications may also be hand delivered to any Executive Board member of Lodge #3 no later than March 15th.
4. To apply for a scholarship, an applicant will submit the following:
   1. A completed application
   2. An essay of not more than two (2) pages detailing why the applicant feels they should receive this scholarship.
   3. A copy of the applicant’s current transcripts. For non-traditional students (over 25 years of age) who are entering college for the first time, this requirement will be waived. Applicants who have graduated from High School or who have completed college work must have a 2.5 Grade Point Average (on a 4.0 scale).
   4. Two (2) letters of recommendation from any of the following:
      1. Faculty members from applicant’s field of study
      2. High school faculty members
      3. Applicants work supervisor
      4. A Lodge #3 member
   5. A recent photo that will not be returned
   6. Applicants who submit their applications in a timely manner MAY be scheduled for an interview with the scholarship committee or panel. The need for interviews shall be at the discretion of the chairman.
   7. All applicants will be judged on demonstrated need, enthusiasm in pursuing their academic goals, academic and community involvement, academic goals and long-range employment goals.
5. If interviews are conducted, they will be held in March prior to the April Lodge member meeting. The committee will submit their recommendations to the membership at the April meeting. The committee shall present the finalist for the scholarships as a motion for the Lodge membership to consider. The Lodge executive board shall resolve any issues arising from the application process.
6. All applicants shall be notified, in writing, as to the awarding of scholarships within two weeks of the Lodge’s vote. A press release shall also be generated after notification of applicants. The committee chair shall be responsible for writing notification letters and the press release to be approved by the president.
7. All scholarship awards are paid directly to the school. Any refunds from this scholarship or failure to attend the school, and the scholarship shall be refunded to the Fraternal Order of Police.
8. These scholarship awards shall only eligible for those students in pre-graduate courses of study. Each applicant is eligible to apply for the scholarship annually, regardless of whether they have received the award previously.
9. Please feel free to use additional sheets of paper to provide the list of requirements in the application if necessary.

**All applications should be mailed or hand delivered to the following address:**

**FOP Lodge #3, to 383 W Drake Rd Suite 202 Fort Collins, Colorado 80526**

*Scholarship Application follows >>>*

A picture containing shirt

Description automatically generated

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| Fraternal order of POlice Lodge #3  **Scholarship Application**  PLEASE MOUSE CLICK INTO EACH BOX, DO NOT USE THE TAB |  |

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| Applicant Information | | | | | | | | | | | | | | | | | | | |
| Last Name: | | | | | | First: | | | | | | | | | M.I. | | Date: | | |
| Street Address: | | | | | | | | | | | | | | | Apartment/Unit # | | | | |
| City: | | | | | | | State: | | | | | | | | ZIP: | | | | |
| Phone: | | | | | | | E-mail Address: | | | | | | | | | | | | |
| **Name of FOP Member Affiliated with:** | | | | | | | | | | | | | | | | | | | |
| **Relationship to Affiliated Member:** | | | | | | | | | | | | | | | | | | | |
| Education | | | | | | | | | | | | | | | | | | | |
| High School: | | | | | | | | | | | City: | | | | | | | | |
| From: | | To: | | | | Did you graduate? | | | | YES  NO | | | | | Degree: | | | | |
| College: | | | | | | | | Address: | | | | | | | | | | | |
| From: | | To: | | | | Did you graduate? | | | YES  NO | | | | | | Degree: | | | | |
| Other: | | | | | | | | Address: | | | | | | | | | | | |
| From: | | To: | | | | Did you graduate? | | | | YES  NO | | | | | Degree: | | | | |
| Extracurricular Activities: *(List should include clubs, organizations, and volunteering.)* | | | | | | | | | | | | | | | | | | | |
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| Honors or Special Recognition: | | | | | | | | | | | | | | | | | | | |
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| Colleges Applied for: | | | | | | | | | | | | | | | | | | | |
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| colleges you have been accepted to: | | | | | | | | | | | | | | | | | | | |
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| Score(s) | | | | | | | | | | | | | | | | | | | |
| **SAT:** | |  | | | | | | | | |  | | | | | | | | |
| **ACT:** | |  | | | | | | | | | |  | | | | | | | |
| Anticpated Field of Study: | | | | | | | | | | | | | | | | | | | |
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| College attending: | | | | | | | | | | | | | | | | | | | |
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| Please list all sources of income that you may use to pay for college. please include, scholarships, grants, parents, other relatives, employer reimbursements, AND WORK study etc.Please include Financial aide you have been offered and or accepted: | | | | | | | | | | | | | | | | | | | |
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| Employment (last 5 Years) | | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | |  | | | | | | |
| Company: | |  | | | | | | | | | | | | | | | | | |
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| Company: | | | |  | | | | | | | | | | | | | | | |
| |  | | --- | | Please add any comments or informatin you Deem relative to this application (additional **SHEETS ARE ACCEPTABLE):** |   I certify that my answers are true and complete to the best of my knowledge. | | | | | | | | | | | | | | | | | | | |
| Signature | | |  | | | | | | | | | | | | Date | |  | | |

*Authorization Page follows >>>*

I hereby authorize the Fraternal Order of Police, Northern Colorado Lodge #3, to use my photo, and biological information in a press release regarding my application to, or receipt of, this scholarship. I understand that if I fail to attend school or use this scholarship in the time or manner prescribed, the scholarship will revert or be refunded to the Northern Colorado Fraternal Order of police and I will hold harmless the Northern Colorado Fraternal Order of Police.

The scholarship program shall be operated under such rules and determination for eligibility as the lodge may adopt in their sole discretion. All decisions of the Lodge and/or its members relating to this program shall be final and non-appealable. The lodge and/or its members shall have absolute discretion in making any decision involving any aspect of this program, including but not limited to, the selection and designation of the scholarship recipients, the amount of scholarship, the number of scholarships, if any, that are awarded, the manner in which the scholarship awards are paid, the process through which the recipients are chosen, the type of scholarship award, and any other limitations or conditions that may be imposed , as the lodge deems appropriate. All applications and supporting documentation of applicants shall become the property of the Northern Colorado Fraternal Order of Police.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please include a photo that is less than a year old. The photo will not be returned.

**For FOP use only**: Committee action: \_\_\_\_approved \_\_\_\_\_denied \_\_\_\_tabled

Lodge action: \_\_\_\_approved \_\_\_\_\_denied \_\_\_\_tabled

Board President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

2nd Board Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_