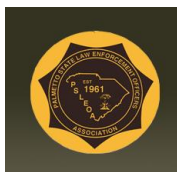


PALMETTO STATE LAW ENFORCEMENT OFFICERS ASSOCIATION GREENVILLE CHAPTER



2015 Scholarship Guidelines

Palmetto State Law Enforcement Officers Association-Greenville Chapter announces the 2015 **Palmetto State Law Enforcement Officers Association Annual Scholarship**.

This scholarship will be awarded to a graduating senior enrolled in any high school, public or private, in the Upstate of South Carolina. The guidelines are listed below.

Program Guidelines & Priorities:

- * Seeking graduating seniors with a record of volunteerism in the community in non-school sponsored activities and participation in extracurricular school activities.
- * Applicants must have a minimum GPA of 2.5, plan to attend a 2 or 4 year college or technical school, and demonstrate financial need. See page 2 for financial eligibility requirements.
- * **Applicants must submit an Essay consisting of a minimum of 1,000 words on the topic: "How Would You Pay It Forward?"**
- * Scholarship funds will be paid **in August 2015 for the first semester of the student's first year directly to the college** and not to the student. It will be the student's responsibility to submit to PSLEOA his or her student ID number and college information.

Applicants must have the endorsement of their Guidance Counselor on their application attesting they are qualified for this scholarship program. Application deadline is **February 6, 2015 at 5:00 p.m.**

Mail one copy of a completed application package to:

(This includes application with signoff by Guidance Department, essay, resume, school transcript, and household 2014 tax return.)

Scholarship Committee 2015
c/ o P.S.L.E.O.A. Greenville Chapter
P.O. Box 412
Greenville, SC 29602

The applications will be reviewed and recipients selected by a committee consisting of volunteers. The scholarships will be awarded in February 2015.

Please submit questions via email to psleoagvl@yahoo.com – Attention Jasmine Twitty.

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SCHOLARSHIP APPLICATION 2015**

This is a need-based scholarship. As a result, each applicant must submit a copy of the household 2014 tax return. The chart below will be used to determine the applicant's financial need.

Household Size	Yearly	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	21,590	1,800	900	831	416
2	29,101	2,426	1,213	1,120	560
3	36,612	3,051	1,526	1,409	705
4	44,123	3,677	1,839	1,698	849
5	51,634	4,303	2,152	1,986	993
6	59,145	4,929	2,465	2,275	1,138
7	66,656	5,555	2,778	2,564	1,282
8	74,167	6,181	3,091	2,853	1,427
Each additional person:	7,511	626	313	289	145

Please type or legibly write your answers.	
1.	Last Name: _____ First Name: _____
2.	Mailing Address Street: _____ City: _____ State: _____ Zip: _____
3.	Daytime Telephone Number: () Email Address: _____
4.	Date of Birth: Month Day Year Gender: _____
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent school transcript is required.
6.	Are you the first person in your family to go to college: YES ___ NO ___
7.	Name and location of High School attending: _____
8.	(If your resume or activities sheet answers question 8, please attach and skip to Question 9.) A. List any academic honors, awards and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities: C. List your non-school sponsored volunteer activities in the community:

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9.	A. If you have decided on what college you will attend, please list school name:		
	B. If not, list your top 3 college choices:		
10.	Name & address of parent(s) or legal guardian(s): (Include address if different than your own listed in Question 2.) Name(s) : _____ Street: _____ City: _____ State: _____ Zip: _____ Home phone of parents or legal guardians: _____ Phone: _____		

11. On a separate sheet, please type or write an essay (1000 words) answering the questions below:

“How Would You Pay It Forward?”

STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the PSLEOA’s scholarship program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to Palmetto State Law Enforcement Officers Association policy, it is my responsibility to remit to the organization the appropriate information for my scholarship to be paid directly to my educational institution for my first semester in August 2014.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to Palmetto State Law Enforcement Officers Association

Name of Guidance Counselor submitting the application: _____

High School: _____

Contact information (email and phone): _____

Signature of Guidance Counselor: _____ **Date:** _____

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Checklist

- Application
- Essay
- Resume/Activity Sheet
- Guidance Counselor signature
- School Transcript
- Household 2014 Tax Return

MAIL COMPLETE APPLICATION PACKAGE TO THE FOUNDATION AT:

**Scholarship Committee 2015
c/o PSLEOA-Greenville Chapter
P.O. Box 213
Greenville, SC 29602**

REMINDER:

**The deadline for this application to be received by the organization is:
February 6, 2015 at 5:00 p.m.**