Florida Sheriff's Explorers Associaton

Basic Law Enforcement/Correctional 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:	
A 1 1D 00	
Awards and Recognition	
	ecognition that were a result of your assistance or regards to you as an Explorer:

Information that you must attach with your application:

		e results of the CJBAT and the name, address, and phone
	· ·	hat you are applying for.
-	-	ge essay describing your goals in law enforcement and why the scholarship. The essay should be as followed:
Ü	Ø 2 pages	•
	∅ Typed	
	Ø Font size 12	
		Roman Type
	Ø Double Space	V-
		in for this scholarship the applicant must be of age to attend
an academy an	d must be gradu	ating high school or in college. The applicant must take the
CJBAT before a	pplying.	
• <u>Certific</u>	cations	
Ce	ertification by	Explorer
• I c	ertify that the fo	regoing facts are accurate to the best of my knowledge. If
se	lected for this sc	nolarship, I agree to use 100% of the awarded funds to attend
an	y certified Law E	nforcement Academy within the State of Florida. These funds
wi	ll be used within	12 months from the date the scholarship is awarded.
Da	te	Explorer Signature
Ce	ertification by	the Post
	_	applicant is approved by Post number and is qualified
		iff's Explorers Association Basic Law Enforcement Academy
	holarship	
	-	Advisor's Signature
	COMMITTEE A	
Date received by co	mmittee and signatu	re
Nomination accept	ed as recipient	Date
Nomination rejecte	d as recipient	Date

Committee Chairman's Signature: