

MINNESOTA SHERIFFS' ASSOCIATION

100 Empire Drive Suite 222, St. Paul, MN 55103

Date:

Notice: Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable). Applications which are not complete and legible will not be considered. If space provided is not sufficient for complete answers, or you wish to furnish additional information, attach sheets of the same size as this application, and number answers to correspond with questions. When completed, return application to your local Sheriff's Office for their signature and submittal.

PERSONAL HISTORY

	RESID	ENCE		
Present Residence Address: (Apartment, Street, City, State, Zip Code)		Telephone Numbers: Daytime Evening		
Email Address				
List chronologically yo	ur residences in the past	5 years.		
Dates From - To	Address		<u>City</u>	<u>State/Zip</u>
		DUCATION		
<u>Name of School</u> High School	<u>Location</u>	Dates <u>From-To</u>	Course/Degree <u>2 or 4 Yr Programs</u>	Years <u>Completed</u>
		-		
College(s)				
		-		
		_		
<u>Graduate School</u>				
		-		

List any special	abilities, interests,	, sports or hobbies.
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		REFERENCES			
Give three reference	s, include: one emplo	oyer, friend, and other.			
Complete Name		Occupation		No. Yrs. Acq.	
Address		City/State/Zip			
() Daytime Phone #		() Evening Phone #			
Daytime I none #		Evening I none #			
Complete Name		Occupation		No. Yrs.	Acq.
Address		City/State/Zip			
()		()		_	
Daytime Phone #		Evening Phone #	_	-	
Complete Name		Occupation		No. Yrs.	Acq.
Address		City/State/Zip			
() Daytime Phone #		() Evening Phone #		-	
	MII	LITARY RECORD			
Have you ever served on ac	ctive duty in the Armed Forc	ces of the United States?	O Yes	O No	
Branch of Military Service_					
Highest rank attained					
Dates of active duty: <u>from</u>	/ / to	<u> </u>			
Type of Discharge					
Member of Reserve or Nati	ional Guard? O Yes O	No			
	ORGANIZ	ZATION MEMBERSHIP			
		any club, society or organization?	O Yes	O No	
If yes, list below. (Do	,				

STUDENT NARRATIVE & STATEMENT OF NEED

What is your strongest personal characteristic? What do you consider your weakest characteristic? Any Why?

Explain your interest in becoming a Law Enforcement Officer.

How do you make decisions that may impact the lives of others around you or in your social group?

Describe why you are applying for this scholarship in no more than 150 words. (Use additional sheets if needed.)

Please designate the Name and Mailing Address of the College or Technical Program and dates you will be/are attending. All applications must be accompanied by a transcript. Transcript does not have to be certified.

CONSENT FOR RELEASE OF INFORMATION

You are being asked to supply private or confidential information about yourself. The purpose of asking for this information is to $_$ County Sheriffs' Office in determining your eligibility for this grant application. You have a right assist the to refuse to supply this information; however, as a consequence, we may not be able to complete the review of your grant application. I understand that I may revoke this consent at any time and that upon fulfillment of the above stated purpose this consent will automatically expire without my express revocation. I certify this application information is true and correct.

Please Print Name

Applicant's Signature

Date

County of Residence

Sheriff's Signature