

**Donald B. Gamblin Jr. Memorial Scholarship
2019
\$500.00 Scholarship**

ELIGIBILITY & DOCUMENTATION REQUIRED

Applicant must be a dependent child of a Shawnee Officer in good standing with the FOP, the dependent child of a Shawnee Officer killed in the line of duty, or the child of a retired Shawnee Officer in good standing with the FOP.

Each applicant is eligible to be awarded the scholarship one (1) time only. After being selected and accepting this scholarship, he/she is no longer eligible to apply again.

Applicant must be a graduating senior or already attending college. Applicant must be seeking an Undergraduate degree.

Each applicant must:

- Complete an application form.
- Provide most recent transcripts.
- Provide admissions to an accredited College or University.
- Provide two letters of recommendation from non-family members.
- Write an essay of why you are deserving of this scholarship. (Suggestion: Applicants will be rated on grammar, spelling, punctuation, content and appearance.)

SELECTION PROCESS

Please submit completed applications in a sealed envelope marked ONLY with "FOPA/Scholarship Application". Please do not put your name on the outside of the envelope. Dead line for applications is April 5, 2019 by 5pm. Applications may be placed in the FOPA mail box located in records. The recipient will be notified and officially recognized at the Awards Ceremony held at the Civic Center on Friday April 26, 2019 at 5:30 pm. If you have any questions, please contact Renee Brunner at reneemb09@gmail.com or 419-345-1311.

Donald B. Gamblin Education 2019 Scholarship Application

\$500.00

Applicant's Name _____ DOB ____/____/____

Parent/Guardian Name _____

Mailing Address _____ Apt. # _____

City _____ State _____ Zip _____

Phone () _____ Email _____

Please share your academic and professional goals. _____

Please share any academic honors, awards and/or school involved activities. _____

Please share your community support and outside interest. _____

Is there anything else you want the Selection Committee to know about you? _____

I have read and understand all information on the application and affirm that all information submitted is true and accurate. I also understand that if all criteria have not been met, my application will not be considered.

Signature _____ Date _____