

**WASHTENAW ONE HUNDRED CLUB  
2018 STUDENT SCHOLARSHIP APPLICATION**

Scholarships are only available to children of active public safety personnel of Washtenaw County Police, Fire, and Corrections Officers. Previous scholarship winners are not eligible.

**NOTE:** It is required that you answer every section. Awardees will be selected based upon demonstrated accomplishments in the areas of scholarship, volunteer activity, leadership, and future goals. Do not send pictures with the application.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

High School: \_\_\_\_\_ Cumulative grade point average \_\_\_\_\_

Name of High School Counselor: \_\_\_\_\_ Counselor's Email: \_\_\_\_\_

Name of College/University where accepted or enrolled: \_\_\_\_\_

In order to qualify, you must be enrolled in an Accredited Bachelor/Graduate four-year school: Is this a four-year school?

\_\_\_ Yes \_\_\_ No

If no, is this an accredited associate's degree program in the public safety field, including criminal justice and firefighting?

\_\_\_ Yes \_\_\_ No

Will you be registering for at least 12 semester credit hours? \_\_\_ Yes \_\_\_ No

Affiliation of parents with Washtenaw County fire or police organization, or Washtenaw County Jail. (Sorry, retirees and HVA members do not qualify)

Parent's Name: \_\_\_\_\_

(Agency) Position: \_\_\_\_\_ Number of years \_\_\_\_\_

List the **leadership** roles you have performed within the past five years.

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Describe how you performed one particular leadership role.

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List **community volunteer services** you have performed. Briefly describe the amount of time and type of service academic accomplishments performed.

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How did volunteering contribute to your personal growth?

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Describe your **academic accomplishments** and any honors received.

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If you are currently attending a university or college, please give details.

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We would like you to write in your own handwriting, a paragraph about yourself, outlining your personal reasons for choosing to attend college and your **personal goals after graduation**. (Additional sheets of paper may be used, if needed.)

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**By signing this application I: (1) affirm that I have not received a previous scholarship award from Washtenaw 100; (2) understand that I am required to provide proof of enrollment prior to receiving the award, and (3) affirm that I will complete a full course load within one year of the award or will return the scholarship.**

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**By signing this application I: (1) affirm that applicant has not received a previous scholarship award from Washtenaw 100; (2) understand that applicant is required to provide proof of enrollment prior to receiving the award, and (3) affirm that if applicant does not complete a full course load within one year of the award I am responsible to see that the scholarship is returned.**

Date: \_\_\_\_\_ Signature of Parent: \_\_\_\_\_

Parent's Name Printed: \_\_\_\_\_

Department Affiliation: \_\_\_\_\_

Applications are due: **May 15, 2018 by 6:00pm EST**

Submit Applications to: **info@Washtenaw100.org** or to Washtenaw 100, PO Box 1204, Ann Arbor, MI 48106

Email subject line: **Washtenaw 100 Club Scholarship**

*Applicants will receive email notification of receipt of application. Scholarship Awardees will be notified on or before June 1, 2018. We plan to award up to ten (10) \$2,000 scholarships this year. The scholarship will be sent directly to the recipient, to be used only for tuition as applied for in this application.*