

**ROCKLAND COUNTY PATROLMEN'S BENEVOLENT ASSOCIATION
SCHOLARSHIP APPLICATION**

Student's Full Name _____
First Middle Initial Last

Student's Address _____
Street City State Zip Code

Telephone Number _____ Date of Birth _____

Name of Parents or Guardian _____

Honors & Awards (High School) _____

Offices held in class or school _____

Extracurricular Participation in school (include athletics) _____

Community Service and/or out of school activities _____

POST SECONDARY EDUCATION PLANS:

To which colleges or universities have you been accepted?

Which do you plan to attend? _____

Intended College Major _____

Please attach a short TYPED statement about yourself and your plans for the future. State why you feel that you are qualified to receive the Rockland County PBA Scholarship (maximum of 500 words).

RELEASE STATEMENT - please read and sign in the space indicated below:

I hereby authorize my high school Guidance Department to provide the Rockland County PBA Scholarship Committee a transcript of grades, rank in class, and SAT scores. I understand this information will be kept in strictest confidence and be used only to help in the evaluation of candidates for the Rockland County PBA Scholarship. All privileged information will be destroyed at the end of the selection process.

Students Name (Please Print)

Signature of parent or guardian

Date

Signature of student

Date