



New Hampshire Association of  
Chiefs of Police  
www.nhchiefsofpolice.com

**\*APPLICATION FOR SCHOLARSHIP\***

***All applications must be received in the office by the 3:00pm on May 10, 2024***

**(This application must be completed in its entirety)**

**BIOGRAPHICAL INFORMATION**

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET TOWN STATE ZIP

SOCIAL SECURITY NO: \_\_\_\_\_ TELEPHONE # (\_\_\_\_) \_\_\_\_\_

LEGAL ADDRESS (If different from above): \_\_\_\_\_

E-MAIL: \_\_\_\_\_

HIGH SCHOOL & TOWN ATTENDED: \_\_\_\_\_

INSTITUTION TO ATTEND: \_\_\_\_\_

ACADEMIC CONCENTRATION: \_\_\_\_\_

YEAR AND/OR SEMESTER TO ENTER: \_\_\_\_\_

TOTAL COST TO ATTEND (TUITION, BOOKS, LABS FEES, HOUSING, ETC): \_\_\_\_\_

OTHER SCHOLARSHIPS AND/OR AID TO BE RECEIVED: \_\_\_\_\_

AMOUNT OF FUNDING NEEDED: \_\_\_\_\_

**FAMILY INFORMATION**

MOTHER- ( ) Married ( ) Single ( ) Remarried

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FATHER- ( ) Married ( ) Single ( ) Remarried

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NUMBER OF DEPENDANTS IN THE FAMILY: Sisters \_\_\_\_\_ Brothers \_\_\_\_\_

NUMBERS OF OTHERS CURRENTLY ATTENDING COLLEGE: \_\_\_\_\_

**FINANCIAL AID STATEMENT**

If you are living with, and deriving support from any or all of the following- *PLEASE use N/A to indicate any that are not applicable to your situation.*

**ADJUSTED GROSS INCOME AS LISTED ON LAST YEARS UNITED STATES  
INCOME TAX RETURN**

1. Father's annual income-	\$_____	.00
2. Mother's annual income-	\$_____	.00
3. Applicant's annual income-	\$_____	.00
4. Spouse's (if applicable) annual income-	\$_____	.00
5. Other sources of funding available- (Scholarships, grants, trusts, gifts, etc.)	\$_____	.00
<b>TOTAL FUNDING FROM ALL SOURCES-</b>	<b>\$_____</b>	<b>.00</b>

If applicable, who claimed the applicant as a dependant on last year's tax return?

( ) Mother                      ( ) Father                      ( ) Both, filing jointly                      ( ) Self

**PERSONAL REFERENCES (Please include letters of recommendation)**

**DESIRED POST-SECONDARY DEGREE**

\_\_\_\_\_

**CERTIFICATION**

\_\_\_\_\_  
SIGNATURE of SPONSORING CHIEF of POLICE

\_\_\_\_\_  
DATE

DEPARTMENT: \_\_\_\_\_ TEL#:: \_\_\_\_\_

All information contained in this application is true and complete to the best of my knowledge and belief.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

Mail the completed application packet, ***Return Receipt or Delivery Confirmation (USPS)*** or by ***UPS or FedEx*** to:

NHACoP- Scholarship  
1 Municipal Dr.  
Derry, NH. 03038

Questions may be directed to Chief Glen Drolet, Chairman- Scholarship Committee of the New Hampshire Association of Chiefs of Police at (603) 942-9101

**STATEMENT OF NEED (required):** Please attach a statement that explains any special circumstance that may exist affecting your income and need (i.e. alimony, child support, other tuitions, outstanding debts, etc.).

**COMMUNITY/ LEADERSHIP SERVICE**

Please attach a statement that identifies with detail any community or leadership service you have participated in.

**DEGREE IMPACT**

Please attach a statement that articulates how your degree with benefit law enforcement.

**ESSAY**

Please articulate/explain in 500 words or less what your goals and objectives are upon graduation from college.