

NEW MILFORD POLICE UNION
C.O.P.S. LOCAL 47

2023 Scholarship Application

Each year the New Milford Police Union offers a Scholarship Award opportunity to New Milford High School students that are looking to enter post-secondary education. Applicants, who are planning to enroll in a course of study in Criminal Justice, or a Law Enforcement related field, will be given first priority for this scholarship award. Candidates must be in good standing to be eligible for this scholarship. Candidates will be judged on their academic achievements, involvement in community activities, participation in extracurricular activities, work experience and financial need.

The selection of the scholarship recipients will be made by the
New Milford Police Union Scholarship Committee.

***The New Milford Police Union will award up to
\$6,000 in scholarships***

A. Personal Data

Applicant's Name _____ Date of Birth _____

Home Address _____

City _____ State _____ Zip Code _____

Applicant's Phone (Home) _____ (Cell) _____

Applicant's Email Address _____

Return completed application postmarked by April 1, 2023 to:

**New Milford Police Department
c/o New Milford Police Union
Scholarship Committee
49 Poplar Street
New Milford, CT 06776**

B. Work Experience

Describe your work experience during the past 4 years. Indicate dates of employment in each job, and approximate number of hours worked each week.

Position	Date From (mo/yr)	Date To (mo/yr)	Hours Per Week	Hourly Rate

C. Community/School Involvement

List all school activities in which you have participated during the past 4 years (e.g. clubs, church work, volunteer work). Indicate all special awards, honors.

Activity	Years of Participation	Special Awards, Honors

Make a personal statement of your plans as they relate to your educational and career objectives and future goals.

Please report any unusual family, personal or financial circumstances you feel warrant attention.

D. Family Information

Father: _____
Address: _____
Occupation: _____ Annual Income: \$ _____
Employer: _____

Mother: _____
Address: _____
Occupation: _____ Annual Income: \$ _____
Employer: _____

Dependent Children:
Number: _____ Ages: _____ Number now in college: _____

E. Institution

Name of Institution(s) applied to: _____

Name of Institution(s) accepted by: _____

Major / Minor: _____

School you plan to attend: _____

F. High School Record

Applicants must include a high school transcript of grades and have the following section completed by the appropriate school official.

Applicant ranks _____ in a class of _____ Cumulative grade point average: _____

Highest SAT: _____ / _____
EBRW Math

Highest ACT: Composite Score: _____

School Official's Signature Title Date () Telephone Number

School Address street city State zip code

G. Applicant Appraisal (required)

To be filled out by a high school guidance counselor, teacher or supervisor.

You have been asked to provide information in support of this application for financial aid. Please give immediate and serious attention to the following statements. When complete, please return this form to applicant or make arrangements to mail form prior to deadline date.

The applicant's choice of a post-secondary education is: extremely appropriate very appropriate moderately appropriate inappropriate

The applicant's achievements reflect his/her ability: extremely well moderately well very well not well

The applicant's ability to set realistic attainable goals: excellent good fair poor

The quality of the applicant's commitment to school and community is: excellent good fair poor

I know the applicant: extremely well moderately well very well not well

Comments: _____

_____ ()
Appraiser's Signature Title Date Telephone Number

Appraiser's Printed Name

Appraiser's Business and Address (street)

_____ (city) (state) (zip code)

H. Required Attachments

- A copy of page one of your **FAFSA Student Aid Report (SAR)** showing the expected family contribution (EFC)
- Transcript of High School Grades

I. Authorization

The applicant hereby authorizes the officials of New Milford High School to make available to the scholarship selection committee whatever records are needed. Student must be in good standing to be eligible for this scholarship award.

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in disqualification.

Applicant's Signature

Date

Parent's Signature

Date

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