

LOS ANGELES POLICE MEMORIAL FOUNDATION
College Scholarship Application – Academic Year 2016-2017

About the Selection Committee: Selection Committee members devote a significant number of hours each year to reading application materials, discussing them, voting, interviewing finalists, and deliberating further, before selecting the scholarship winners. The committee is composed exclusively of civilian directors of the Police Memorial Foundation, and none is related to any current or former LAPD employee. If a committee member has a close personal relationship with any applicant's family, that member will not participate in discussing or voting on that applicant.

Instructions To Applicant:

1. Complete pages 1-3 of the attached Application form. Please print clearly or type.
2. Arrange for your most recent official high school transcript to be sent to the address below. Because the selection committee needs the same types of information for each applicant, please include a copy of your SAT or ACT score report, with your completed application, if your transcript does not already include these scores. **YOUR APPLICATION IS NOT COMPLETE, AND CANNOT BE CONSIDERED, WITHOUT THE TRANSCRIPT.** Give a copy of the "Instructions to School Registrar" when requesting your school transcripts.
3. Give a copy of the "Instructions Regarding Letters of Recommendation" to each person writing one of the two letters required. Remember that at least one letter must come from a teacher or counselor, and **neither may be written by a relative**. You should give both of them a stamped envelope addressed to the location below.
4. The application, transcript and recommendation letters should all be mailed or hand-delivered to:
Los Angeles Police Memorial Foundation
1880 North Academy Drive, Los Angeles, California 90012
Attention: Alice Sturdy
5. This year's **deadline** for receiving all materials is **March 18, 2016**. If it is postmarked March 18, 2016, and arrives later, that is acceptable. **NO OTHER EXCEPTIONS.**
6. The Selection Committee expects to meet in early April to select a group of Finalists who will be invited to attend a personal interview. The winners will be selected and announced shortly after those interviews.
7. **Eligibility:** Current high school seniors, (dependents of active sworn officers or career civilian employees), who will enroll at a four-year college or university. (Does not include children of retirees or reserves.)

We look forward to receiving your applications!

Instructions For Letters Of Recommendation

The Los Angeles Police Memorial Foundation annually awards several college scholarship grants (3 for \$10,000 each). Children and stepchildren of active officers and career civilians of the Los Angeles Police Department are eligible to apply.

These are strictly merit scholarships. The single most important factor is academic achievement, but the all-civilian selection committee also considers other criteria, including personal character, extracurricular accomplishments, and potential for success.

To assist in the difficult task of choosing winners, the selection committee requires two letters of recommendation. One must be from a teacher or counselor, and neither may be written by a relative.

THE DEADLINE IS MARCH 18, 2016. If you are close to that date, you can fax your letter to (323) 276-3030, and the original can arrive late. Please send the letter directly to:

**Los Angeles Police Memorial Foundation
1880 North Academy Drive, Los Angeles, CA 90012
Attention: Alice Sturdy**

Your willingness to share your knowledge about one of these applicants is very much appreciated! If you have any questions, please do not hesitate to contact us at 213-847-4240 or 323-276-5970.

Instructions to School Registrar

The Los Angeles Police Memorial Foundation annually awards several college scholarship grants (3 for \$10,000 each). Children and step-children of active officers and career civilian employees of the Los Angeles Police Department are eligible to apply.

These are merit scholarships, and the single most important factor is academic achievement. Therefore, we are requesting that each student provide the most recent official high school transcript.

The Foundation's scholarship committee seeks to obtain the same categories of information about each applicant. Some additional information may be needed, depending on the transcript format used by your school. If your form of official transcript does not already display this student's cumulative GPA (both UC-weighted and non-weighted), please supply that information to us. For the same reason, please inform us of this student's class ranking (e.g., 25 of 300), if possible.

The **deadline** for application acceptance is **MARCH 18, 2016**. Please send the sealed official transcript directly to the following:

**Los Angeles Police Memorial Foundation
1880 North Academy Drive, Los Angeles, CA 90012
Attention: Alice Sturdy**

If it is close to the deadline, you can fax it to our office, and forward the sealed transcript to arrive at a later date. Our fax number is 323-276-3030.

The Los Angeles Police Memorial Foundation thanks you for providing this information, to assist this student in the grant process. If you have any questions, please do not hesitate to contact us at 213-847-4240 or 323-276-5970.

APPLICATION
Los Angeles Police Memorial Foundation
Scholarship Contest

Please type or print.

Student Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Phone: _____ Phone: _____

Date of Birth: _____ E-mail address _____

Student's High School: _____ Date of Graduation: _____

High School Address: _____

College you will attend (if uncertain, list the colleges to which you have applied) and expected graduation date: _____

Names and amounts of any college scholarships or grants which you have already won for the academic year 2016 – 2017: _____

Honors or awards received in high school: _____

Information of parent who is current LAPD employee: Name: _____

Rank: _____ Serial # _____ Assignment: _____ Years with LAPD _____

Please describe the academic accomplishment you are most proud of, and explain why.
(A separate piece of paper is acceptable.)

Please tell us how you spent the last two summers (or vacations between school years),
including any jobs you have held.

Which extracurricular activity has been the most important to you, and why?

Please tell us the following information:

Your favorite book _____

Your favorite movie _____

Your favorite keepsake or memento _____

**Los Angeles Police Memorial Foundation
Application for Educational Grant**

Part I: Student's Information

NAME: _____ D.O.B. _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

SCHOOL ATTENDING: _____ EMAIL: _____

ANNUAL COST: _____ INCOME, IF ANY: _____

EMPLOYER: _____

BRIEFLY EXPLAIN WHY YOU ARE REQUESTING ASSISTANCE: _____

LAPD Member Who Qualifies You as a Grant Recipient:

NAME: _____ SERIAL # _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SPOUSE'S NAME: _____ HOME PHONE: _____

WORK PHONE: _____ CELL PHONE: _____

EMPLOYER: _____ ANNUAL INCOME: _____

DATE OF DEATH OR DISABILITY PENSION: ___ / ___ / ___ D.O.B. _____

KILLED IN THE LINE OF DUTY: ___ YES ___ NO LAST DIVISION: _____

STUDENT'S INFORMATION (Continued)

ASSETS

ITEM	COST	PURCHASE DATE	CURRENT VALUE	BALANCE OWED
Home (Own – Not Rent)				
Auto/Autos Year & Make				
Other Assets 1. _____ 2. _____ 3. _____				

SAVINGS

ACCOUNT	BANK NAME	ACCOUNT #	AMOUNT
Savings			
Checking			
Credit Union			
Stocks/Bonds			
Other			

MONTHLY EXPENSES

EXPENSE	PER MONTH
Rent/Mortgage	
Food	
Utilities	
Auto payments/Insurance/Gas/Repair	
Credit Union	
Credit Cards	
Loans	
Other Debts	
TOTAL	

Student's Signature _____ Date _____

PARENT'S INFORMATION (Continued)

SAVINGS

ACCOUNT	BANK NAME	ACCOUNT #	AMOUNT
Savings			
Checking			
Deferred Comp.			
Credit Union			
Stocks/Bonds			
Other Savings			

MONTHLY EXPENSES

EXPENSES	PER MONTH
Rent/Mortgage	
Food	
Utilities	
Auto Payments/Insurance/Gas/Repairs	
Credit Union	
Credit Cards	
Loans	
Other Debts	
TOTAL	

Parent's Signature _____ Date _____

Please return to: Los Angeles Police Memorial Foundation
1880 North Academy Dr.
Los Angeles, CA 90012

If you have any questions, please call (213) 847-4239 or (323) 276-5970. You will be notified of your eligibility as soon as possible

Staff: Alan Atkins, Executive Director Alice Sturdy, Executive Assistant.

PART II: PARENT'S INFORMATION

NAME (last, first, middle) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

SPOUSE'S NAME _____ EMAIL: _____

ANNUAL HOUSEHOLD INCOME _____

(Attach your most recent bank/credit union statement, pay stub, and deferred compensation statement)

DEPENDENTS

NAME	DATE OF BIRTH

ASSETS

ITEM	COST	PURCHASE DATE	CURRENT VALUE	BALANCE OWED
Home				
Rentals				
Autos				
Make _____ Yr _____				
Make _____ Yr _____				
Boats				
Motorcycle				
Motor Home				
Other Assets				
1. _____				
2. _____				
3. _____				

Los Angeles Police Memorial Foundation

APPLICATION FOR BENEFITS

Name _____ Serial# _____ Division _____

 Last First Middle

Address _____ City _____ Zip _____

Phones: _____

Home _____ Work _____ Cell _____ Email _____

D.O.B. _____ Rank _____ Date Hired _____ S.S. # _____

Spouse: _____ S. S. # _____ Date of Marriage _____

Domestic Partner: _____ S.S.# _____ Date of Declaration _____

(with City of Los Angeles)

Dependents: Names

D.O.B.

Dependents: Names	D.O.B.

Briefly explain why you are requesting assistance: _____

Salary: Monthly: \$ _____ Spouse/Domestic Partner Salary (Monthly): \$ _____

Spouse/Domestic Partner Employer: _____ Phone: _____

Outside _____

Employment: _____ Phone: _____ Income: _____

Do you have additional income, i.e., Child support, Annuities, AFLAC, Hartford, Colonial and/or Police Relief Benefits? List all that apply: _____

Income: _____ Estimate amount needed: \$ _____

Your application cannot be processed unless copies of the following information are included: Bank/Credit Union statements, Deferred Comp statements, last pay stub and credit card statements.

Financial Information

<i>Assets</i>	<i>Purchase Price</i>	<i>Purchase Date</i>	<i>Current Value</i>	<i>Balance</i>
Home				
Rentals				
Auto Yr ___ Make _____				
Auto Yr ___ Make _____				
Boats / RV's				
Credit Card				
Credit Card				
Other				

Deposit Accounts

<i>Type of Accountt</i>	<i>Institutions</i>	<i>Account #</i>	<i>Balance</i>
Savings			
Checking			
Deferred Compensation			
Stocks/Bonds			
Other			
Other			

Monthly Expenses:

Mortgage/Rent _____
 2nd Mortgage _____
 Car Payments _____
 Boat/ RV _____
 Utilities _____
 Food/ Supplies _____

Insurance/Car _____
 Insurance/Home _____
 Credit Cards _____
 Child Support _____
 Other Debts/Loans _____
 Total Expenses _____

Authorization for Release of Information

To Whom It May Concern:

The purpose of this authorization is to assist the **Los Angeles Police Foundation** to:

- A. Investigate and copy by photocopying, or by any other method, all of my financial records, all my medical records, including history, diagnosis, treatment, prognosis and any other information involved with charges incurred for medical treatment.
- B. Investigate and copy by photocopying, or by any other method all of my financial records, without limitation, credit union transactions and records of any other financial transaction or bank/savings accounts.

I expressly waive any right of confidentiality and any claim by reason of release of information in accordance herewith.

Print Name _____

Signature _____ Date _____

Please return completed application with all requested materials to:

Los Angeles Police Memorial Foundation
1880 North Academy Drive
Los Angeles, CA 90012

Phone: **(213) 847-4239 or 847-4240**
Fax: (323) 276-3030
E-mail: lapdmf@sbcglobal.net
Website: lapmf.org

Executive Director: Alan Atkins
Executive Assistant: Alice Sturdy

Interdepartment Mail: Stop #412