



Travis County Sheriff's Officers Association

400 West 14th Street, Suite 220

Austin, Texas 78701

Phone: 512.289.5916

TCSOA SCHOLARSHIP APPLICATION

Applicant's Name: _____ Last 4 digits of SSN: _____

Address: _____ City/St/Zip: _____

Home Phone: _____ Alternate Phone: _____

TCSOA Member Name: _____

High School Attended: _____ GPA: _____

Name of College: _____ Major: _____

Address of College: _____ Cty/St/Zip: _____

Phone Number: _____ Classification: (circle one) Fr So Jr Sr

Other Scholarships Received: _____

Honors / Awards / or other Recognitions: _____

Community Service: _____

Reference 1: _____ Phone: _____

Reference 2: _____ Phone: _____

*** Note: Each reference must provide a letter of recommendation.**

Essay: Write an ESSAY about why you deserve to receive an Award and / or Scholarship. Indicate your objectives. You may want to include information about your educational, career and personal goals. You may also demonstrate your talent by writing about any special interests or special circumstances that you may wish the selection committee to consider. No minimum or maximum word count however, the committee will consider the content.

APPLICATION DEADLINE IS MARCH 30, 2012

Applicant Signature: _____ Date: _____

For Office Use Only

Date Received _____

Eligible Y N · If no, explain _____

Notification Date _____