



## LOUISIANA SHERIFFS

HONORARY MEMBERSHIP PROGRAM  
Imparting Service and Learning

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### LOUISIANA SHERIFFS' SCHOLARSHIP PROGRAM GUIDELINES FOR SCHOLARSHIP PROGRAM

The Louisiana Sheriffs' Honoratory Membership Program will award sixty-four scholarships of a maximum of \$500 each. This effort is a meaningful expression of the Program's confidence in, and respect for, education and training.

The goal of the Program is to provide assistance to worthy Louisiana students in furthering their education and training with resources made available through the Honoratory Membership Program. The Sheriffs of Louisiana consider this scholarship program an investment in the future and believe this will provide for better communication with the residents of the communities served.

Scholarships will be given to graduating high school students from each parish where the Sheriff is an affiliate of the Honoratory Membership Program.

There shall be no restrictions on the purposes for which the scholarship is spent. Nor shall the scholarship be considered a loan in any form. Rather, it shall be given to the student in the form of a gift to help in meeting the burdensome costs associated with higher education, in whatever manner that students deem necessary.

There shall be no restriction on any applicant by reason of race, age, creed, color, sex, or national origin. The only limitations are that applicants be permanent residents of Louisiana; scholarships be utilized at institutions of higher learning within the state of Louisiana; and students plan to be enrolled as full-time, undergraduate students.

Only the immediate family of the Sheriff is ineligible to apply. Families of Sheriff's Office employees are eligible to submit an application.

**Completed applications shall be submitted to the Sheriff of the parish of the applicant's permanent Louisiana residence by the deadline of April 1<sup>st</sup> of each year.** Applicants must be eligible for admission to the school indicated on the application. The award will only be paid for attendance at institutions of higher learning within the state of Louisiana.

Applications received in the Sheriff's Office, on or before **April 1<sup>st</sup>**, are to be reviewed by a committee of nonpartisan citizens selected by the Sheriff. That committee of citizens will review, evaluate, and select the winner and two alternates to represent their parish. Selected applications should be marked: Winner, Alternate 1 and Alternate 2, accordingly. Completed applications of all winners and alternates should be forwarded to the office of the Louisiana Sheriffs' Honoratory Membership Program in Baton Rouge by **April 15<sup>th</sup>** of each year.

The names of all scholarship winners will be announced by **May 1<sup>st</sup>** of each year. Scholarship certificates will be prepared for each winner and alternates for presentation at graduation or awards' ceremonies. Funds from the Honoratory Membership Program shall be remitted to the local Sheriff for distribution to the scholarship winner, after satisfactory evidence of enrollment has been received by the Program.

If for any reason, a recipient relinquishes a scholarship or fails to enroll as a full-time, undergraduate student at an institution of higher learning in the State of Louisiana, that scholarship will be granted to an alternate from the same parish which was selected by the local committee.

The Louisiana Sheriffs' Honoratory Membership Program reserves the right to reject any winner based upon good cause, such as failure to comply with prescribed guidelines, or behavior or misconduct causing discredit and/or embarrassment to a Sheriff or the Louisiana Sheriffs' Honoratory Membership Program, and to award the scholarship to an alternate from the same parish.

**LOUISIANA SHERIFFS' SCHOLARSHIP PROGRAM**  
**Louisiana Sheriffs' Honorary Membership Program's**  
**Undergraduate Educational Scholarship Application**  
(Please type or print)

**Completed Scholarship Applications must be returned directly to the local Sheriff's Office no later than April 1<sup>st</sup> to the attention of Major Ginny Higgins, P.O. Box 247, St. Martinville, Louisiana 70582.**

Applicant's Name \_\_\_\_\_

Area Code and Phone Number \_\_\_\_\_

Mailing address \_\_\_\_\_

Number & Street

City and State

Zip Code

Parish

Home address \_\_\_\_\_

Number & Street

City and State

Zip Code

Parish

Social Security Number \_\_\_\_\_

High School attended \_\_\_\_\_

Name

City and Parish

Cumulative Grade-Point Average \_\_\_\_\_

ACT Score \_\_\_\_\_

Anticipated Date of Graduation: Month and Date \_\_\_\_\_

Year \_\_\_\_\_

What college, university or other institution of higher learning will applicant attend in the fall? \_\_\_\_\_

What will be the applicant's anticipated major field of study while attending college? \_\_\_\_\_

What are applicant's present career plans? \_\_\_\_\_

Is applicant currently receiving, or will receive, other aid or scholarships? \_\_\_\_\_

Explain \_\_\_\_\_

**INFORMATION ABOUT APPLICANT'S FAMILY:**

Father or Guardian (Full name) \_\_\_\_\_

Mailing Address (number & street, city & state, zip code) \_\_\_\_\_

Nature of Employment \_\_\_\_\_

Place of Employment \_\_\_\_\_

Mother (Full name, include maiden name) \_\_\_\_\_

Mailing Address (number & street, city & state, zip code) \_\_\_\_\_

Nature of Employment \_\_\_\_\_

Place of Employment \_\_\_\_\_

How many children are dependent upon the family for support? \_\_\_\_\_

Has either parent served in the U. S. Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_ Branch \_\_\_\_\_

In the space below, list any scholarship and /or honorary awards that applicant has received during his/her high school career. Also include any student activities/organizations of which he/she is a member.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In the space below, briefly explain to the best of applicant's ability, the reason he/she is applying for this scholarship and how receipt of this scholarship will better enable him/her to reach his/her career goals.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All of the information contained is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature