

**Alaska Peace Officers Association  
Capital City Chapter  
Adair-Kennedy Scholarship Application 2020  
PO Box 20751  
Juneau, AK 99802**

**PERSONAL**

Name (First, Middle, Last): \_\_\_\_\_  
Residence Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Are you a U.S. Citizen?    Yes    No  
Social Security Number: \_\_\_\_\_  
Parents/Guardians Name: \_\_\_\_\_

**HIGH SCHOOL**

High School/GED Attended: \_\_\_\_\_  
City/State \_\_\_\_\_  
Date Graduated/Graduating \_\_\_\_\_ Grade Point Average \_\_\_\_\_

**COLLEGE**

College/University currently attending/will be attending School Year 2020-2021: \_\_\_\_\_  
Degree/Major You Are Seeking \_\_\_\_\_  
Grade Point Average \_\_\_\_\_  
College Credits Earned Through December 2020 \_\_\_\_\_  
Credits Remaining For Graduation \_\_\_\_\_  
Vocational school attended \_\_\_\_\_

**EXTRACURRICULAR ACTIVITIES**

Please list any scholastic and/or athletic honors

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

Please list community or volunteer service.

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Please list your work experience.

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Please list any military service.

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Please list your special interest, hobbies, and/or skills.

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**FINANCIAL NEED**

Please list your anticipated financial needs.

Tuition: \_\_\_\_\_

Travel Costs: \_\_\_\_\_

Room/Board: \_\_\_\_\_

Other Financial Support (employment, scholarship, savings, family support)

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**ACKNOWLEDGEMENT**

In signing this application, I do hereby affirm that the information I am providing on this form and attached sheet(s) is true and correct to the best of my knowledge. I have read and agree to abide by the eligibility rules of the Alaska Peace Officers Association 2020 Scholarship Award Program.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

If you are selected to receive our scholarship, by signing this you authorize Capital City Chapter of APOA to use certain application information to publicize the award.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_