## FRATERNAL ORDER OF POLICE GATEWAY LODGE #138 SCHOLARSHIP AWARD APPLICATION

Namo:		Date of Birth:Social Security Number:	
Address:			
City:	State:	Zip: Telephone:	
High School Attended:			
High School Grade Point Average:		Curriculum Taken:	
ଷ ଅ	*****PLEASE SUPPLY YOUR HIG	EH SCHOOL TRANSCRIPT****	
Parents: Mother:		Fathor:	
Address:		Address:	
City:	State:	City: State:	
Number of I	Dependants in Family:	Total Income of Parents:	
	*****IJST OF REFERENCES N	OT RELATED TO YOU*****	
Name:	* 3	Name:	
Address:	1 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	Address:	
Telephone:		mo. Lo. 8	
Employer: a	Capplicable)		
Address:			
Telephone:		Supervisor's Name:	
Have you applied for any other scholarships?		Total Amounts: \$	
Total amount of money available to you for your first year?		\$	
	*****COLLEGE OR UNIVERSITY	YOU PLAN TO ATTEND****	
Namo:		Telephone:	
Address:	9		
City:		State: Zip:	
Major:			
What is you	r reason for applying for this award? (Please use t	eack if necessary.) -7 -> -> ->	
Mail To:			
rante AVI	POP P.O. 15	Signature of Applicant THIS FORM WILL BE THE ONLY ONE ACCEPTED MUST BE RECEIVED BY	
	Sidney, Ohio 45365		

Deadline - 05-06-2024 Must be mailed in by the about dotte.