

IDAHO SHERIFFS' ASSOCIATION
Scholarship Application

COVER PAGE

Please print clearly:

Date: _____

Full Name: _____

Birth Date: _____

Student ID #: _____

Social Security Number: _____

Address: _____

City: _____, IDAHO Zip: _____

Telephone: _____ (residence)

_____ (mobile)

Email Address: _____

I am the _____ of a sheriff or sheriff's employee, named

_____ who is either the sheriff or member, of

the _____ County Sheriff's Office.

The following items must be submitted:

Cover Page

Resume (new applicants only)

Sealed Transcripts

Letters of Recommendations (new applicants only)

Student I.D. number

Letter from applicant stating declared major or academic areas of interest