



Riverside Sheriffs' Association Student Scholarship Program

THE PROGRAM

Riverside Sheriffs' Association and the Riverside County Deputy Sheriff Relief Foundation established a scholarship program to assist members' children and student residents of Riverside County, California, who plan to continue in postsecondary education. Scholarships are offered each year for full-time study at an accredited two- or four-year college, university, vocational-technical or trade school of the student's choice in the United States.

This scholarship program is administered by Scholarship America®, the nation's largest designer and manager of scholarship and tuition reimbursement programs for corporations, foundations, associations and individuals. Awards are granted without regard to race, color, creed, religion, sexual orientation, gender, disability or national origin.

ELIGIBILITY

Riverside Sheriffs' Association Memorial Scholarship

Applicants must be –

- Dependent* children of an active or retired regular or affiliate member of the Riverside Sheriffs' Association.

*Dependent children are defined as natural and legally adopted children or step children living in the member's household or primarily supported by the employee and claimed as a dependent on the member's Federal income tax.

- High school senior, graduate or undergraduate who plan to enroll or who is currently enrolled in full-time undergraduate study at an accredited two- or four-year college, university, vocational-technical, or trade school in the United States for the entire academic year.

Riverside County Deputy Sheriff Relief Foundation Scholarship

Applicants must be –

- Citizen of the United States
- Resident of Riverside County, California
- High school senior, graduate or undergraduate who plan to enroll or who is currently enrolled in full-time undergraduate study at an accredited two- or four-year college, university, vocational-technical, or trade school in the United States for the entire academic year.

AWARDS

Eight awards will be granted each year, provided there are qualified applicants.

Recipients selected for the named awards will receive an award of \$2,500 if attending an accredited four-year college or university to obtain a bachelor degree or \$1,000 if attending an accredited two-year college, vocational-technical, or trade school to obtain an associate degree, certificate or licensure.

Awards are distributed equally between the two named scholarships.

Financial need will be considered. Recipient must demonstrate need.

Awards are not renewable; however students may reapply to the program each year they meet eligibility requirements.

Awards are for undergraduate study only.

APPLICATION

Interested students must complete the application and mail it along with a current, complete transcript of grades to Scholarship America postmarked no later than **March 31**. Applicants will receive acknowledgment of receipt of their application. If an acknowledgment email is not received within three weeks, applicants may call Scholarship America to verify that the application has been received.

Applicants are responsible for gathering and submitting all necessary information. Instructions for completing the Financial Data section of the application are included. Applications are evaluated on the information supplied; therefore, answer all questions as completely as possible. Incomplete applications will not be evaluated. All information received is considered confidential and is reviewed only by Scholarship America.

SELECTION OF RECIPIENTS

Scholarship recipients are selected on the basis of academic record, demonstrated leadership and participation in school and community activities, honors, work experience, statement of goals and aspirations, unusual personal or family circumstances, an outside appraisal and financial need. Financial need must be demonstrated for the student to receive an award.

Selection of recipients is made by Scholarship America. In no instance does any officer or member of Riverside Sheriffs' Association play a part in the selection. All applicants agree to accept the decision as final.

Applicants will be notified in May. Not all applicants to the program will be selected as recipients.

PAYMENT OF SCHOLARSHIPS

Scholarship America processes scholarship payments on behalf of Riverside Sheriffs' Association. Payments are made in one installment on August 1. The check is mailed to each recipient's home address and is made payable to the school for the student.

OBLIGATIONS

Recipients have no obligation to Riverside Sheriffs' Association. They are, however, required to notify Scholarship America of any changes in address, school enrollment, or other relevant information and to send a complete transcript when requested.

REVISIONS

Riverside Sheriffs' Association reserves the right to review the conditions and procedures of this scholarship program and to make changes at any time including termination of the program.

ADDITIONAL INFORMATION

Questions regarding the scholarship program should be addressed to:

Riverside Sheriffs' Association Student Scholarship Program
Scholarship America
One Scholarship Way
Saint Peter, MN 56082

Telephone: (507) 931-1682

INSTRUCTIONS FOR COMPLETING THE FINANCIAL DATA SECTION OF THE APPLICATION

The Financial Data section of the application should be completed by the parent/guardian. Information should be from a completed tax return or based on estimated information to be filed with the IRS/Revenue Canada.

1. **State/Province of residence** is the state/province where the parents reside and pay state/province income tax.
2. **Adjusted gross income** can be found on IRS FORM 1040 and is gross income reduced by specific adjustments allowed by law. For Canadian applicants, report Taxable Income (both parents).
3. **U.S./Canadian total federal tax paid** includes the total amount of **federal** income tax to be paid. This is **not** the amount withheld from paychecks. (The amount withheld should be adjusted by any refund or additional taxes due.) Do **not** report state/province income tax.
4. **Total income** of parent(s) should be reported individually. Provide information for both natural parents, when possible. **If the student resides with only one parent**, financial information **must** be received from the parent who claims the child as a dependent for tax purposes. If a parent has remarried, the spouse's information is required if the spouse is a legal guardian of the student, or claims the student as a dependent, or the student is included in the spouse's benefit plan. **If necessary, two Financial Data sections may be submitted by the student.** A copy of the Financial Data section may be made in order for one to be completed by each parent.
5. **Total number of family members** living in the household and primarily supported by the reported income may include:
 - the applicant
 - the applicant's parents
 - other children living in the household
 - dependent college students living away from home
 - other people who live in the household and receive more than half of their support from the reported income
6. **Marital status** is the current status of the person from whom the financial information is submitted.
7. **Of the total number of family members on line 5, number of students attending college** includes family members attending a two- or four-year college, university, or vocational-technical school at least half-time. Include the applicant in this number. Do not include parents.

NOTE: Any exceptions to providing financial information as instructed above must be submitted to Scholarship America in writing.



Riverside Sheriffs' Association Student Scholarship Program

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness ensure your application will be reviewed properly.

Application postmark deadline March 31

FOR SCHOLARSHIP AMERICA USE ONLY

| I.D. # | AA | PD | RIC/CS | GPA | SATCR | SATM | SATW | ACTC | TOTAL |
|--------|----|----|--------|-----|-------|------|------|------|-------|
| | | | | | | | | | |

APPLICANT DATA

Last Name _____ First _____ Middle Initial _____

Permanent Home Mailing Address _____ Apartment # _____

City _____ State _____ ZIP Code _____

Telephone (_____) _____ Date of Birth: Month _____ Day _____ Year _____

Email Address _____

I am a U.S. Citizen: Yes No

Please indicate your status. (For statistical purposes only) Male Female

American Indian /Alaska Native Black/African American Multi-Racial White

Asian Hispanic/Latino Native Hawaiian/Pacific Islander

MEMBER, PARENT OR GUARDIAN INFORMATION

Last Name _____ First _____ Middle Initial _____

County Employee ID Number _____

Work Telephone (_____) _____ Email Address _____

Address _____

City _____ State _____ ZIP Code _____

The applicant is a child of a Riverside Sheriffs' Association member Yes No

HIGH SCHOOL DATA

School Name _____ High School Graduation Date: Month _____ Year _____

City _____ State _____ Telephone (_____) _____

County: Riverside Other: _____

POST-SECONDARY SCHOOL DATA

Name of postsecondary school you currently attend or plan to attend. Use official school name. Do not use abbreviations.

_____ City _____ State _____

4 yr. College or University 2 yr. Community or Junior College

Vocational-Technical School Other, explain _____

Year in school next year: 1 2 3 4 5 Other, explain _____

Major or course of study: _____ Expected college graduation date: Month _____ Year _____

Degree sought: Bachelor Other _____

Student will: live on campus live off campus commute from home

If school choice is a public institution, applicant will pay: in-state resident tuition out-of-state tuition

Sending a resumé does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments.

WORK EXPERIENCE

Describe your work experience during the **past four years** (e.g., food server, babysitting, lawn mowing, office work). Indicate dates of employment for each job and approximate **number of hours worked** each week.

| Employer/Position | From - Mo/Yr | To - Mo/Yr | Hours per Week | Were you paid for your work? |
|-------------------|--------------|------------|----------------|------------------------------|
| | | | | YES / NO |
| | | | | YES / NO |
| | | | | YES / NO |
| | | | | YES / NO |

ACTIVITIES, AWARDS AND HONORS

List all school activities in which you have participated during the **past four years** (e.g., student government, music, sports, etc.). List all community activities in which you have participated without pay during the **past four years** (e.g., Boy/Girl Scouts, hospital volunteer, Special Olympics). Note all special awards, honors and offices held.

| Activity | No. of Years Partic. | Special Awards, Honors | Offices Held | Activity | No. of Years Partic. | Special Awards, Honors | Offices Held |
|----------|----------------------|------------------------|--------------|----------|----------------------|------------------------|--------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

GOALS AND ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational and career objectives and long-term goals.

UNUSUAL CIRCUMSTANCES

Please describe how and when any unusual family or personal circumstances have affected your achievement in school, work experience, or your participation in school and community activities.

PARENTS' FINANCIAL DATA (REQUIRED)

The Riverside Sheriffs' Association member or the applicant's parents must complete this portion of the application. Adjusted gross income and total federal income tax amounts should be from parents' most recently filed tax return. **To be considered for an award, this section must be filled out completely.**

- | | |
|--|--|
| <p>1. State of Residence</p> <p>2. Adjusted Gross Income (FORM 1040) \$ _____</p> <p>3. Total Federal Tax Paid (FORM 1040) \$ _____ (Not the amount withheld from paychecks)</p> <p>4. Total Income of Parent \$ _____</p> <p style="padding-left: 20px;">Total Income of Other Parent..... \$ _____</p> | <p>5. Total number of family members living in the household and primarily supported by the reported income ...# _____</p> <p>6. Marital status of employee parent or guardian: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Single</p> <p>7. Of the total number of family members on line 5, number of students attending college at least half-time during the next school year (include applicant, exclude parents) ...# _____</p> |
|--|--|

OTHER AWARDS

Please list the name and annual amount of any grants or scholarships you have been awarded for the coming school year only.

| | | | |
|----------------|--|----------|---|
| Name of Award: | School to which award will be applied: | Amount: | Check One: |
| _____ | _____ | \$ _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Pending |
| _____ | _____ | \$ _____ | <input type="checkbox"/> Granted <input type="checkbox"/> Pending |

APPLICANT APPRAISAL (REQUIRED)

To the Applicant: This section is required and must be completed in the format provided. If incomplete, your application will not be evaluated. The section is to be completed by a high school counselor or advisor, an instructor, or a work supervisor who knows you well.

To the Adult Appraiser: You have been asked to provide information in support of this application. Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.

| | | | | |
|--|--|---|---|--|
| The applicant's choice of a postsecondary educational program is | <input type="checkbox"/> extremely appropriate | <input type="checkbox"/> very appropriate | <input type="checkbox"/> moderately appropriate | <input type="checkbox"/> inappropriate |
| The applicant's achievements reflect his/her ability | <input type="checkbox"/> extremely well | <input type="checkbox"/> very well | <input type="checkbox"/> moderately well | <input type="checkbox"/> not well |
| The applicant's ability to set realistic and attainable goals is | <input type="checkbox"/> excellent | <input type="checkbox"/> good | <input type="checkbox"/> fair | <input type="checkbox"/> poor |
| The quality of the applicant's commitment to school and/or community is | <input type="checkbox"/> excellent | <input type="checkbox"/> good | <input type="checkbox"/> fair | <input type="checkbox"/> poor |
| The applicant is able to seek, find, and use learning resources | <input type="checkbox"/> extremely well | <input type="checkbox"/> very well | <input type="checkbox"/> moderately well | <input type="checkbox"/> not well |
| The applicant demonstrates curiosity and initiative | <input type="checkbox"/> extremely well | <input type="checkbox"/> very well | <input type="checkbox"/> moderately well | <input type="checkbox"/> not well |
| The applicant demonstrates good problem-solving skills, follows through, and completes tasks | <input type="checkbox"/> extremely well | <input type="checkbox"/> very well | <input type="checkbox"/> moderately well | <input type="checkbox"/> not well |
| The applicant's respect for self and others is | <input type="checkbox"/> excellent | <input type="checkbox"/> good | <input type="checkbox"/> fair | <input type="checkbox"/> poor |

Comments: _____

Appraiser's Name _____ Title _____ Telephone (_____) _____

Signature _____ Organization _____ Date _____

TRANSCRIPT INFORMATION

A complete transcript of grades **must** be sent with this application. Grade reports are not acceptable.

- Students currently or previously enrolled in college or vocational-technical school must** include all college or Vo-tech transcripts of grades from each school attended. Unofficial transcript must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken. **(Completion of high school information below is not necessary)**
- High School seniors and students who have completed less than one full quarter or semester** of postsecondary education must include a high school transcript of grades and have this section below completed by the appropriate school official. **(A clear explanation of the high school's grading scale must also be submitted.)**

| | | | | | | | | | |
|--|--------------------------------|------------------|------|---------|---------|------|---------|---------|-----------|
| Applicant ranks _____ in a class of _____ | Cumulative Grade Point Average | SAT | | | ACT | | | | |
| | Weighted: _____/4.0 scale | Critical Reading | Math | Writing | English | Math | Reading | Science | Composite |
| | Unweighted: _____/4.0 scale | | | | | | | | |

School Official's Signature _____ Date _____ Title _____ Phone (_____) _____

School Official's Address: Street _____ City _____ State _____ ZIP Code _____

APPLICATION CHECKLIST

The student is responsible for submitting all materials to Scholarship America on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when all of the following materials have been received:

- Student Application with completed Applicant Appraisal
- Current Complete Transcript(s) of Grades (including grading scale)

All materials, including transcript, must be addressed to:

Riverside Sheriffs' Association Student Scholarship Program
Scholarship America
One Scholarship Way
Saint Peter, MN 56082

Postmark deadline March 31

CERTIFICATION

Scholarship America has the sole responsibility for selecting recipients based on criteria as set forth in the program's description. This application becomes the property of Scholarship America. (It is recommended you keep a copy for your files.)

I acknowledge decisions are final. I certify I meet eligibility requirements of the program as described in the guidelines and the information provided is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including an official transcript of grades and a copy of my U.S. Income Tax Return. Falsification of information may result in termination of any award granted.

Applicant's Signature _____ Date _____

Member's/Parent's Signature _____ Date _____