## Missouri Peace Officers Foundation

101 West McCarty, Suite 200 Jefferson City, MO 65101 (816) 581-3767 Fax: (816) 581-3768

the.mpoa@mopoa.org

## 2021 SCHOLARSHIP APPLICATION

Name	Date of Birth
Address	
Cell:	Email:
MPOA Member in your family	
	<del>-</del>
teams/honors, music, debate, etc.	st organizations and offices held, athletic ( <u>Use additional page if necessary</u> )
High School Name	Graduation Date
High School & Address	MIM/ Y Y
	GPA
Rank in graduating class	Number in graduating class
College Name	College GPA
Name	
Names/address of high schools/co	olleges attended and dates:
	to
	to
	to

Name of post-high scho	ol institution, college, or university you expect to attend:
What are your career pl	ans after completing your college program?
Explain why you need th	nis financial assistance. (Continue on separate page if necessary)
What have you done, or	plan to do, to help finance your college education?
I agree that if granted a regarding my scholastic President in order that I	I/college transcript must be attached to be considered.  scholarship, I will, if requested, make my grades or other factors record available to the Missouri Peace Officers Foundation MPOF members who make this scholarship available may know ith their investment in me.
, , ,	e above statement of information is correct to the best of my
Date	Signature of Applicant
Mail application to:	Dale Schmidt, President Missouri Peace Officers Foundation 101 West McCarty, Suite 200 Jefferson City, MO 65101

Application Deadline: March 26, 2021

PLEASE NOTE: You will receive a confirmation email upon receipt of your application by MPOA.