



MARYLAND DELAWARE CHAPTER
FBI NAA
SCHOLARSHIP APPLICATION



Eligibility: APPLICANT MUST BE A CHILD OR GRANDCHILD OF AN ACTIVE MARYLAND DELAWARE FBINAA MEMBER.

The following criteria must be met in order for an eligible family member to apply for this scholarship:

** The member is eligible to apply after two consecutive years of active paid status with the MD DE chapter. This period will begin on the date of the initial paid membership.*

**Eligible family member must be 24 years of age or younger.*

**Eligible family member (Applicant) must be enrolled for an under graduate degree only.*

Instructions:

Editing this form is restricted to entering your applicant information in the appropriate fields. Please provide all information requested. Failure to submit a completed application will disqualify you from consideration. Please type all answers-handwritten applications will not be accepted. The completed application must be received by the scholarship committee chairperson (listed below) before and no later than midnight May 31st. A recent photograph may be requested of all winners at a later date (to be utilized for publicity purposes). Two letters of recommendation are required. Pages 2 - 4 are to be completed by the applicant. Page 5 of the application is to be completed by the FBINAA, Inc. Member.

The completed application must be sent via U.S. Mail or Email as noted below:

-OR-

Send PDF file to: _____

ALL APPLICATIONS MUST BE RECEIVED NO LATER THAN MIDNIGHT MAY 31st.

APPLICATION CHECKLIST

APPLICATION

- Applicant Information
- Parent / Guardian Information
- College / University Information
- Character References Information
- FBINAA Inc. Member Information
(to be completed by the member)

ATTACHMENTS

- College / University Acceptance Letter
- Two letters of recommendation
- Current transcript. Must include GPA 4.0 scale (not weighted GPA).

APPLICANT INFORMATION

Name: _____ DOB: _____
Last First M.I.

Address: _____ Apartment / Unit #: _____
Street Address Apartment/Unit #
City State ZIP Code

Phone: _____ Email: _____

PARENT / GUARDIAN INFORMATION

Name: _____ DOB: _____
Last First M.I.

Address: _____ Apartment / Unit #: _____
Street Address Apartment/Unit #
City State ZIP Code

Phone: _____ Email: _____

COLLEGE / UNIVERSITY INFORMATION

Please enter the following information of the College, University, or School you plan to attend.

Name: _____

Address: _____

Street Address

City

State

ZIP Code

Have you been accepted to this institution?

YES

Date of admission: _____

MM / D D / YY

If yes, please attach a copy of your acceptance letter.

NO

Anticipated date of acceptance: _____

MM / D D / YY

Will you be a full-time student?

YES

NO

If no, please explain:

[Empty box for explanation]

CHARACTER REFERENCES

Please provide the following information for two (2) references (not family members) who can attest to your personal character.

*Reminder: Each of these reference must forward a Letter of Recommendation.

Name: _____

Last

First

M.I.

DOB: _____

Address: _____

Street Address

Apartment / Unit #:

Apartment/Unit #

City

State

ZIP Code

Name: _____

Last

First

M.I.

DOB: _____

Address: _____

Street Address

Apartment / Unit #:

Apartment/Unit #

City

State

ZIP Code

APPLICANT QUESTIONNAIRE

Please answer the following questions.

1. Please list your extracurricular activities and describe your level of involvement in each within the past 3 years.

2. Please list your academic honors and other school related achievements including scholarships within the last 3 years.

3. Please list patriotic, community, civic, or church activities within the last 3 years.

4. Please describe your personal and career goals. (Suggested 400-word maximum).

5. Please state why you believe you are the best candidate for this award. (Suggested 400-word maximum).

FBINAA MEMBER INFORMATION

The following section must be completed by the FBINAA, Inc. Member.

Name: _____
Last First M.I.

Relationship to applicant: _____

Session #: _____ Active FBINAA Member since (date): _____
MM/D D/YY

List State Conferences you have attended by year:

List National Conferences attended by year:

Have you or a family member received a scholarship from the Maryland Delaware FBINAA, Inc. previously? YES
NO

If yes, what years? _____

Applicant's Signature Date

FBINAA Member Signature Date