



# KENTUCKY TACTICAL OFFICERS ASSOCIATION, INC.

## Student Scholarship Fund



### FIELD 1: APPLICANT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Marital Status: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

High School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

College: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Other: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Name of Institution Scholarship to be Utilized: \_\_\_\_\_

Present Level: \_\_\_\_\_

### FIELD 2: FINANCIAL INFORMATION

Student's and Spouse/Parent's income and/or resources for the period of January 1 through December 31 of most recent year.

1. Wages, Salaries, Tips, or incomes  
Do not include wage study earnings  
Gross - Before Taxes \_\_\_\_\_

2. Other taxable income, dividends,  
interest, etc. \_\_\_\_\_

3. Total value of other scholarships  
currently awarded. \_\_\_\_\_

4. Do you reside with any parent or  
spouse currently?  Yes  No

5. Do you receive meals or other  
living expenses from any parent or  
spouse?  Yes  No

6. Does any parent or spouse  
provide assistance with educational  
expenses?  Yes  No

**\*\*If you answered YES to questions 4, 5, or 6 then parent or spouse's income MUST be listed below\*\***

Parent/Spouse Income \$ \_\_\_\_\_ Aid to Families with Dependant Children (AFDC) \$ \_\_\_\_\_

Social Security Income \$ \_\_\_\_\_ Other school assistance, grants, scholarships, etc. \$ \_\_\_\_\_

Veterans Admin. Benefit \$ \_\_\_\_\_

Other income/resources \$ \_\_\_\_\_ TOTAL INCOME \$ \_\_\_\_\_

**FIELD 3: DECLARATIONS**

1. Are you a spouse or dependant of a line of duty death officer or a deceased or disabled law enforcement officer?  Yes  No

If YES, please give the name and department of the officer at the time of death or disability:

[Empty text box for name and department of officer]

2. Are you dependant of your parent or guardian (for tax purposes)?  Yes  No

3. Are you an immediate family member of a current or retired sworn KY Law Enforcement officer?  Yes  No

If YES, please provide Name, Relationship, Department, and address of relative:

[Empty text box for relative information]

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Officer or Family Member Signature

**FIELD 4: SWORN LAW ENFORCEMENT OFFICERS**

To be completed by current sworn Law Enforcement Officers ONLY if applying for scholarship for yourself

Agency: \_\_\_\_\_

Service Years: \_\_\_\_\_

Address: \_\_\_\_\_

Rank: \_\_\_\_\_

City: \_\_\_\_\_

Phone Number: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Supervisor: \_\_\_\_\_

E-mail: \_\_\_\_\_

I attest that the department does not provide tuition assistance to department employees

\_\_\_\_\_  
Signature of Attesting Agency Head

## FIELD 5: SUBMISSION REQUIREMENTS

Submit this completed application along with the following requested documents:

1. A letter that tells the KTOA and the selection committee about yourself. You may wish to include information about your extracurricular activities, community service, career goals, financial needs, and how you would use the scholarship.
2. Two letters of reference to include names, addresses, and telephone numbers of the reference in the event that the selection committee wishes to contact the reference for follow up information.
3. Proof of enrollment for the upcoming semester. (official class schedule from registrar's office or acceptance letter into your program)
4. Application must be received no later than Friday, June 15th, 2018, by 5:00 PM.

**For consideration all the above described information MUST be attached to the application upon submission**

Mail completed application packet to : **Kentucky Tactical Officers Association, Inc.**  
**C/O Eric T. Nelson, President**  
**303 Court Street, Suite 409**  
**Covington, KY 41011-1628**

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**NOTE 1:** Award is limited to a maximum of \$500 per year, except if the recipient is a survivor or dependant of a law enforcement officer who was killed in the line of duty wherein the award amount will be \$1000.

**NOTE 2:** The Kentucky Tactical Officers Association does not discriminate on the basis of race, color, national origin, sex, age, religion, disability, marital status, veteran status, and/or any other protected status.