



**Palmetto State Law Enforcement Officers Association
Thomas "Fox" Abrams
Scholarship Award**

Application

The following items must accompany this completed application:

- 1. Essay of approximately 1000 words on the selected topic.**
- 2. High school or preparatory school transcript.**
- 3. Copy of acceptance letter from undergraduate school.**
- 4. Proof of residency in South Carolina.**

Please use black ink or a typewriter for completing this form.

Date: _____

Name of School: _____

Principal of Headmaster: _____

School Mailing Address: _____

School Physical Address: _____

City: _____ County: _____ Zip Code: _____

Applicant Information

(First) (Middle) (Last) (AKA)

Date of Birth Social Security# Place of Birth

Address City State Zip Code

Home Phone# Cell Phone#

What occupation or profession are you planning to pursue as a life's work?

What organizations or clubs are you a member of in your school?

What organizations or clubs are you a member of in your community?

Have you applied for or received any other scholarships? _____

If yes, where and how much?

Family Information

Number of siblings under 18: _____ Number of siblings in College: _____

Father's Name: _____ Father's Occupation: _____
 living deceased

Address (If different): _____

City: _____ State: _____ Zip: _____

Mother's Name: _____ Mother's Occupation: _____
 living deceased

Address (If different): _____

City: _____ State: _____ Zip: _____

Palmetto State Law Enforcement Officers Association Nomination Form

Note: This page must be completed by the school guidance counselor, principal or headmaster. This information is received in confidence and will only be use for the purpose in which it was used.

1. **Scholastic Record** _____
(name of applicant)

(a.) In a () Junior () Senior Class of _____members, the nominee ranked _____
(Exact rank)

(b.) S.A.T. of College Boards, Junior Year: Total _____ V_____ M_____

S.A.T. of College Boards, Senior Year: Total _____ V_____ M_____

(If Senior S.A.T. scores are unavailable at this time please forward soon as possible)

Has Nominee taken National Merit Scholarship Qualifying Test? Yes No
If taken, list Selection Scores: Percentile:

(c.) List below other test score, including College Board Achievement tests:

_____ Name of Test	_____ Date Taken	_____ Score
_____ Name of Test	_____ Date Taken	_____ Score
_____ Name of Test	_____ Date Taken	_____ Score
_____ Name of Test	_____ Date Taken	_____ Score

2. Do you recommend this student for P.S.L.E.O.A Scholarship award? Yes No

3. Why?

Print Name of Principal/Headmaster Signature of Principal/Headmaster Date
(This nomination will not be accepted without the signature of the principal or headmaster.)

Name of Guidance Counselor School Phone #

Application and all requested information must be turned in by the 2nd Friday in April of the qualifying year.

**Mail completed application to:
P.S.L.E.O.A Scholarship Committee
25-C Rachel Court
Spartanburg, SC 29303**

Applicant's Photo

