

|  |
| --- |
| Applicant Information |
| Last Name |  | First Name |  | M.I. | Date |  |
| Date of Birth (MM/DD/YY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Miami-Dade County high school seniors may apply but must be at least 19 years of age **upon completion of the police academy.** Once awarded the scholarship ($6,000 maximum applied to tuition and expenses), you will have 2 years upon which to apply to, be accepted and begin classes at the academy. If you do not begin the police academy within 2 years of scholarship award date, you will forfeit the scholarship.)  |
| Street Address |  | Apartment/Unit # |  |
| City |  | State |  | Zip |  |
| Phone |  | E-mail Address |  |
| Are you a citizen of the United States? | YES [ ]  | NO [ ]  | If no, are you authorized to reside in the U.S.? | YES [ ]  | NO [ ]  |
| Have you ever been arrested or convicted of a felony? | YES [ ]  | NO [ ]  | If yes, explain |  |
|  |
| School Information |
| High School |  |
| Expected Graduation Date: | Current GPA: |
| Honors/Awards received: |  |
| Extracurricular activities: |  |
| Participation in outside community activities: |
|  |
| References |
| Please list **two** personal references (excluding parents) and **one** professional reference (school counselor, teacher, etc). |
| Full Name |  | Relationship |  |
| Company |  | Phone | ( ) |
| Address |  |
| Full Name |  | Relationship |  |
| Company |  | Phone | ( ) |
| Address |  |
| Full Name |  | Relationship |  |
| Company |  | Phone | ( ) |
| Address |  |
| **Please attach one letter of recommendation from a personal reference (excluding parents) AND one letter of recommendation from a professional reference (school counselor, teacher, etc) for a total of TWO letters.** |

|  |
| --- |
| Current Employment and previous employment (if applicable) |
| Company/Place of Employment: |  | Phone | ( ) |
| Address |  | Supervisor |  |
| Job Title |  |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
| Company/Place of Employment: |  | Phone | ( ) |
| Address |  | Supervisor |  |
| Job Title |  |  |
| Responsibilities |  |
| From |  | To |  | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
|  |  |  |  |
| Questionnaire: Please attach your responses to ALL THREE OF the following questions |
| **Why do you want to pursue a career in law enforcement?**Response Requirements: MUST be MINIMUM 1 page typed in 12 pt font Times New Roman, double spaced |
| **What do you consider your highest achievement or your best quality that will assist you in your plans to become a police officer?**Response Requirements: MUST be MINIMUM half a page typed in 12 pt font Times New Roman, double spaced |
| **What are your future plans and goals as a police officer and beyond?**Response Requirements: MUST be MINIMUM half a page typed in 12 pt font Times New Roman, double spaced |
|  |
| Disclaimer and Signature |
| I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application or interview may result in my disqualification from consideration.I understand that this scholarship applies to my attendance at the City of Miami Police Department Academy ONLY. I may not use the scholarship to attend any other police academy. Tuition/expenses of up to $6,000 maximum will be paid directly to the City of Miami Police Academy by Do The Right Thing.I understand that from the date of the scholarship award notification, I have a 2-year time frame with which to apply to, be accepted and begin classes at the City of Miami Police Academy. After 2 years, the scholarship will become null and void. |
| Applicant Signature |  | Date |  |
|  |  |  |  |
|  |  **FOR OFFICE USE ONLY** |  |  |
| DATE APPLICATION RECEIVED |  |  |  |
| DATE SCHOLARSHIP AWARDED |  |  |  |
| DATE SCHOLARSHIP EXPIRES |  |  |  |