PRINCE GEORGE'S COUNTY OFFICE OF THE SHERIFF



Sheriff Melvin C. High Scholarship Program 2022 Application Packet

A 501(c)3 Charitable Organization

Nurturing Youth, Promoting Education, Advancing Success!



5303 Chrysler Way, Upper Marlboro, MD 20772 301-780-8600

Scholarship Application Requirements

FOR AN APPLICATION TO BE CONSIDERED, YOU MUST:

- 1. Be accepted for admission to an accredited college or university.
- 2. Be a **resident**, living in Prince George's County, Maryland.
- 3. Be a high school graduating senior.
- 4. Have your high school guidance counselor document your high school grades on the application.
- 5. Provide a letter of recommendation from a member of your high school's faculty.
- 6. Complete and sign the application.
- 7. Write a one-page essay.
- 8. Submit application and letter of recommendation to the Office of the Sheriff by March 25, 2022.

DEADLINE: Applications must be received by *Friday*, *March 25*, 2022

Return completed application and letter of recommendation to the following address:

Prince George's County
Office of the Sheriff
5303 Chrysler Way
Upper Marlboro, Maryland 20772

or scan and e-mail your completed application to: ejwhitmire@co.pg.md.us

For questions, or further information, please contact: Capt. E. Whitmire at 301-952-2808 or ejwhitmire@co.pg.md.us

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SCHOLARSHIP APPLICATION

(Please answer all questions)

Name in Full	_D.O.B	Age
Home Address		
City		Zip
Home Telephone Number		•
Email	_	

PLEASE NOTE:

- 1. This application applies to **HIGH SCHOOL SENIORS** only.
- 2. Four \$1,000 scholarships will be awarded for four-year college/universities and / or two-year colleges.
- 3. All applications **MUST** include the students G.P.A., documented by the guidance counselor and a Letter of Recommendation from a member of the high school faculty.
- 4. Return completed application *no later than March 25, 2022* to the following address:

Prince George's County Office of the Sheriff 5303 Chrysler Way Upper Marlboro, Maryland 20772

or scan and e-mail your completed application to: ejwhitmire@co.pg.md.us

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SCHOLASTIC DATA:

High School Currently Attending		
SAT Scores:TOTAL		Composite
IOIAL		Composite
Rank:	in Class of: Grade	e Point Average:
RELEASE OF INFORMATI	I <u>ON</u> :	
I authorize my school to provid Scholarship Selection Committee	de information, including confidential	transcripts of my grades, to the
Signature of applicant		_ Date
Signature of parent or guardian _		_ Date
(If student is under 18 years old)		

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FAMILY DATA:				
No. of Dependent Child	ren in Family (including	yourself):	Ages	:
Family Income Range:	Less than \$50,000			
	\$50,000 to \$100,000		<u> </u>	
	Over \$100,000			
FUNDING:				
Have you been awarded	any other Scholarships?	YES		NO
		If YI	ES, total amount:	\$
Other aid you expect to	receive:			
Have you applied for fir	nancial aid? YES	NO	Education Loans?	YES NO
If YES, what type?				
Will you seek employm	ent while a student? YE	S NO	Full Time	Part Time
COLLEGE:				
Name of College / Univ	ersity you plan to attend:			
Curriculum Major:				

PLEASE ANSWER ALL QUESTIONS

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How will a college education change your life and your future?	ESSAY QUESTION: (one-page essay: 100 word minimum) How will a college education change your life and your future?		

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Extra-curricular activity:
Community Service:

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Letter of Recommendation Form

(One recommendation MUST be from a member of the Faculty)

	SE PRINT OR TYPE of Applicant
This se	ction is to be completed by teacher making recommendation.
Name:	Position/Title:
Address	s:
Please	include with your recommendation:
1.	Capacity in which you have observed the applicant and length of time you have known him / her.
2.	Your evaluation of applicant's past academic record, community service and extracurricular activity.
3.	Your evaluation of applicant's college potential.
4.	Any other information which would assist the Selection Committee.

Please attach separate blank sheets if additional information is desired.