



Iowa State Patrol  
Supervisor's Association  
Scholarship Application



Applicant Name:  Phone:

Home Address:

Year Applying For:  ISPSA Member Parent:

College or University:

College Major:

Vocational Goal:

Scholarship Year: 1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  4<sup>th</sup>

(Students are eligible for up to four years)

Make a list of extra curricular activities, elected offices you have held, significant projects you have been involved in, and any work or volunteer experience. (First year applicants only)

Applicant Signature: \_\_\_\_\_ Date:

ISPSA Member Parent Signature: (by signing the ISPSA Member Parent verifies the applicant meets the criteria for eligibility).  
\_\_\_\_\_ Date:

**\*\* Attach to this application, an essay of 250 to 500 words, on a strategy to attain your career goals. (First year applicants only) Applicants may also describe leadership in their own words to fulfill the essay requirement. \*\***