



**Need of Aid
Fraternal Order of Police Lodge 111
Charitable Foundation
Application for Scholarship**



Deadline: This application must be received between June 1 and June 30, 2024.
Please fill out the below form completely and email to needofaid@slcpa.org.

Student Information

Last Name _____ First Name _____ DOB ____/____/____

Home Address _____ City _____ Zip Code _____

Phone (____) - ____ - _____ Email _____

School _____

Parent Information

Last Name _____ First Name _____ DSN _____

Phone (____) - ____ - _____ Assignment _____

Parent is Member of SLCPA FOP (circle one) YES NO

1000 Word Essay (attach additional pages)

How has your parent/guardian's service to the community molded you into the person you are today?

Type only your name and email address at the top of the essay.

Do not list your parent/guardian's name or current work assignment in the essay.

Insert page numbers as *Page 1 of 2*, or similar, at the bottom of the page.

Information provided is confidential and will not be shared outside the board of NOA