



Border Patrol Union Local 2366 Scholarship Application

PLEASE PRINT CLEARLY- ANSWER ALL FIELDS OF THE APPLICATION

Student's

Name: _____

Last, _____ First, _____ MI _____

- Are you currently enrolled in high school? [] or college? []
- Have you ever applied for this application before? Yes [] No []

Address: _____

Street, Avenue, P.O. Box or apartment number

City

State

Zip Code

Telephone number where you can be reached (_____) _____

Sex: Male [] or Female [],

Date of Birth ____/____/____ **Place of Birth** _____

Name of family/Local 2366 member: _____

Station: _____ **How are you related?** _____

Name of Accredited four-year institution that you plan to or are currently attending

Address: _____

Street,

City

State

Zip Code

Overall GPA _____ (Please provide a copy of transcripts)

List Academic Honors, Scholastic or Community groups, or other involvement which you feel may be important:

I certify that this information is true and correct to the best of my knowledge. I understand that falsification of information on this application may jeopardize my chances to receive this scholarship.

Applicant's Signature _____ **Date:** ____/____/____