



North Dakota Fraternal Order of Police State Lodge Student Scholarship application



NAME		Date of Birth	
ADDRESS	CITY	STATE	ZIP
NAME OF HIGH SCHOOL ATTENDING		DATE OF GRADUATION	
GPA AVERAGE	NAME OF SCHOOL PRINCIPAL	NAME OF COLLEGE OR UNIVERSITY TO BE ATTENDED	
WHAT DO YOU PLAN TO MAJOR IN?	DATE OF ENROLLMENT		
LIST EXTRA CURRICULAR ACTIVITIES YOU ARE INVOLVED IN (Athletics, hobbies, clubs, etc.):			
WHAT ARE YOUR PRESENT CAREER PLANS?			
FATHERS NAME	MOTHERS NAME		
NAME OF PARENT WHO IS A MEMBER OF THE FRATENAL ORDER OF POLICE			
PARENTS LAW ENFORCEMENT AGENCY EMPLOYER			
SIGNATURE OF APPLICANT		DATE	
SIGNATURE OF PARENT		DATE	

**My signature grants permission for my name / photo to be used in any publication by the North Dakota FOP*

MAIL TO: NDFOP
Attn: Scholarship Committee
PO BOX 711
West Fargo, ND 58078