

13.	List expenses you expect to incur per semester or quarter:		Description
	A.	Tuition: Amount: \$	
	B.	Books: Amount: \$	
	C.	Room & Board: Amount: \$	
	D.	Other Expenses: Amount: \$	
E.	Other Expenses: Amount: \$		

Comments:

14.	List other financial assistance you will receive per semester or quarter:		Description
	A.	Personal: Amount: \$	
	B.	Other Scholarship(s): Amount: \$	
	C.	Grants: Amount: \$	
	D.	Student Loan(s): Amount: \$	
E.	Other Financial Resources: Amount: \$		

Comments:

15. Do your parents still claim you as a dependent for tax purposes? ____ Yes ____ No

Father/Guardian:	Employer/Occupation:	Annual Income:
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Address:

Mother/Guardian:	Employer/Occupation:	Annual Income:
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Address:

Total number of dependents (#claimed on taxes) in household including yourself:

If you are not claimed by your parents or guardian, then complete this section.

Your Occupation:	Annual Income:
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Your Spouse's Occupation:	Annual Income:
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Use an additional sheet if you need more room to list financial information requested in items 13 & 14.

16.	What are your educational and professional goals and objectives? (You can attach your resume if it has this information.)

17.	List your academic honors, awards, and membership activities while in high school or college: (You can attach your resume if it has this information.)
18.	List your community service activities, hobbies, outside interests, and extracurricular activities: (You can attach your resume if it has this information.)
19.	If selected as a Scholarship winner may ISA publish your name and/or picture as a scholarship recipient? <input type="checkbox"/> Yes <input type="checkbox"/> No

Required Essay Response

(Please attach your essay)

What are your thoughts about the elimination of cash bail in Illinois? Do you think this is a good policy decision? What are the effects? Please explain your rationale for position.

REMEMBER to submit your essay of 500 words or less with your application.

STATEMENT OF ACCURACY

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the ISA scholarship program.

Signature of scholarship applicant: _____ Date: _____

ATTENTION

The deadline for this application to be received is March 15, 2023. Remember all applications are to be submitted to the Sheriff's Office in your County. Do NOT submit to the Illinois Sheriffs' Association. You can find a directory of Sheriff's Office addresses on our website at www.ilsheriff.org