

# Virginia State Police Association Scholarship Fund, Inc.

6942 Forest Hill Avenue, Richmond, Virginia 23225

Fax: 804.320.2616

## 2025 APPLICATION FOR FINANCIAL ASSISTANCE

### PERSONAL INFORMATION

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_  
(Street or P.O. Box) (City) (State) (Zip)

Telephone (\_\_\_\_) \_\_\_\_\_ Birth Date \_\_\_\_ \ \_\_\_\_ \ \_\_\_\_

Students E-Mail Address: \_\_\_\_\_

Parent(s) E-Mail Address: \_\_\_\_\_

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### COLLEGE INFORMATION

Class Year – Fall, 2025 (circle) 1 2 3 4

Name and address of the college at which you have been accepted and will enroll or are currently enrolled:

\_\_\_\_\_  
\_\_\_\_\_

Major Course of study \_\_\_\_\_

Current grade point average \_\_\_\_\_ (If High School Senior, List Final GPA)

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### STUDENT CERTIFICATION

I am a dependent child of a *member* or of a *deceased member* of the Virginia State Police Association.

The name of the VSPA member is: \_\_\_\_\_

(Dad or Mom)

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### FINANCIAL AID INFORMATION

#### PARENTS' INFORMATION

Parent(s) contributing to student's education for 2025 school year \$\_\_\_\_\_

Parent(s) or Legal Guardian name:

Relationship: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

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If the applicant expects to receive financial assistance from any other source this academic year, please list the source and the amount below. Please circle whether the expected amount is a loan or a grant. If the applicant is *not* expecting to receive any assistance, please answer with "N/A".

Source\_\_\_\_\_ Amount\_\_\_\_\_ (Loan or Grant)

Source\_\_\_\_\_ Amount\_\_\_\_\_ (Loan or Grant)

Source\_\_\_\_\_ Amount\_\_\_\_\_ (Loan or Grant)

Source\_\_\_\_\_ Amount\_\_\_\_\_ (Loan or Grant)

#### WRITTEN EXPLANATION OF NEED & GOALS

In the applicants' own handwriting please explain why you need a scholarship and detail any academic/career goals.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Please use additional paper if necessary

### HOUSEHOLD INFORMATION

List Family Members living in Household:

Name of family members

Currently in School (Y or N)  
If yes, what grade?

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Annual Total Household Income (gross income): \$ \_\_\_\_\_

Annual Total Household Expenses: \$ \_\_\_\_\_

#### Parents Assets:

Cash, savings, and checking accounts; \$ \_\_\_\_\_

Parents' monthly mortgage or rental payment: \$ \_\_\_\_\_

If you own home, provide please:

Year Purchased: \_\_\_\_\_

Today's Asset value of Home: \$ \_\_\_\_\_ Amount owed: \$ \_\_\_\_\_

For special circumstances please provide a separate sheet with this application.

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### SIGNATURES REQUIRED

Student \_\_\_\_\_ Date: \_\_\_\_\_

Student's Father: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Mother: \_\_\_\_\_ Date: \_\_\_\_\_

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### APPLICATION SUBMISSION

*This form must be returned to the VSPA office no later than Friday, June 13, 2025. If the application is not filled out completely and the transcript is not official, the application will be disqualified.*

*I hereby acknowledge that the information given in this application is true and correct and I also acknowledge that should I leave any questions unanswered my application will be disqualified.*

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

### TRANSCRIPTS

*A complete transcript of classes from the most recent year of high school or college must be sent directly from the applicant's school to the VSPA office. If the applicant's official transcript is not received at the VSPA office by Friday, July 11, 2025, the application will be disqualified.*

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All applications for scholarships must be received via mail, hand delivery, or PDF (vspa@vspa.org) by the VSPA Office by 4:00 p.m. on June 13, 2025.

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Completed applications and attachments should be mailed to the VSPA office and addressed as follow: VSPA; Children's Scholarship: 6942 Forest Hill Avenue; Richmond, VA 23225 or e-mailed via PDF to [vspa@vspa.org](mailto:vspa@vspa.org). Incomplete applications will not be considered for scholarship awards.

Thank you for applying, and Good Luck! If you have any questions, please contact the VSPA at (804) 320.6272 or e-mail questions to [vspa@vspa.org](mailto:vspa@vspa.org).

### \*\*\*\*\*MARK YOUR CALENDAR \*\*\*\*\*

Important dates you need to know!

Friday, June 13, 2025 - Completed application is due back to VSPA by close of business.  
**Please order your official transcript from your school asap.**

Friday, July 11, 2025 - **"Official" Transcripts from the school** are due to VSPA for processing by close of business.

Friday, August 15, 2025 - The VSPA will make every effort to mail checks to scholarship recipients by this date.

Friday, February 6, 2026 - A copy of your Fall transcript is due to the VSPA. (This transcript can be an unofficial transcript). You may send grades by fax or e-mail to [vspa@vspa.org](mailto:vspa@vspa.org).