



Hispanic Police Officers Association
1470 NW 107 Avenue, Suite P
Miami, Florida 33172
305-594-1173
www.hpoadade.org

March 23, 2009

TO: ALL HPOA Members
FROM: Bill Hernandez, President
RE: SCHOLARSHIPS FOR SONS/DAUGHTERS OF MEMBERS

We are beginning the process of accepting applications for three (3), separate HPOA Scholarships, worth \$2,500 and seven (7) separate HPOA Scholarships, worth \$1,000 a piece, for the school term beginning in the Fall, 2009.

In general terms, interested applicants must:

1. Be a dependent son or daughter of any full-time HPOA members.
2. Be attending a college or community college that is regionally accredited or be enrolled in a degree-seeking program, in the school term beginning in the Fall, 2009;

PLEASE NOTE that the application is (5) five pages long. For that reason, I recommend that you keep the master copy of the application form in your office or in another central location, and simply post multiple copies of the notice we have included herein on bulletin boards stationed throughout your agency. Then, interested parties can secure an application from that central location rather than force us to make hundreds of copies for widespread distribution.

If you have any questions, please call any board member for further information at 305-594-1173.

WH/aa

attachments: 1. NOTICE FOR POSTING AROUND YOUR AGENCY
2. ONE COMPLETE SET OF BLANK APPLICATION FORMS

**2009
Hispanic Police Officer's Association
Scholarships Available**

WHO IS ELIGIBLE?

This program is open to any dependent son or daughter of an HPOA member. The dependent must be attending a regionally accredited community college, college or university in the school term to begin in the Fall, 2009. The dependent's career objective and degree must be focused towards law enforcement, law, corrections, or another aspect of criminal justice. Unrelated course majors are not eligible.

HOW MANY ARE AWARDED AND HOW MUCH ARE THEY WORTH?

Three (3) separate scholarships will be awarded, valued at \$2,500 each
Up to seven (7) separate scholarships may be awarded, valued at \$1,000 each.

SPECIAL INFORMATION:

All applications for scholarships must be accompanied by certain documentation, a listing of which is included in the application package.

WHERE CAN I GET AN APPLICATION PACKAGE?

Log on to WWW.HPOADADE.ORG and click on to the document tab or contact the HPOA executive secretary within the HPOA.

WHAT IS THE APPLICATION DEADLINE?

To facilitate the work of the screening committee, applications for scholarships must be received at the HPOA Office by Friday, May 1, 2009. Winners will be notified by mail and phone.

IF I NEED FURTHER INFORMATION, WHERE DO I CALL?

Call Amy Alvarez, HPOA Executive Secretary, at 305 594-1173.

Sincerely,

Bill Hernandez
President

APPLICATION FOR THE HISPANIC POLICE OFFICERS ASSOCIATION COLLEGE SCHOLARSHIP

For the school year beginning in the Fall 2009

In Fall, 2009 ___ Freshman ___ Sophomore ___ Junior ___ Senior

Name _____
Nickname _____
Mailing Address _____
City _____
State _____ Zip Code _____
Home Phone _____
Date of Birth _____
Father's Name _____ Class Size _____
Mother's Name _____ GPA _____

Feel Free To Use Additional Sheets, If Necessary)

Since at least one of the applicant's parents must be a full-time, paid (sworn) employee of the Miami-Dade Police Department, it is my Mother/Father (circle one) who is employed at the:

Miami-Dade Police Department,
Station/Bureau: _____

Parent Name: _____

Position Held: _____

Applicants must submit an essay **no longer than 750 words** explaining their scholastic and career goals. The essay should concentrate on how the degree they are seeking will assist them in contributing to society and the community in which they live.

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I have been active in the following school and/or community organizations:

List any leadership positions you have held in school and/or community organizations, and which of those positions you now hold:

List all awards, commendations and scholarships you have received, the sponsoring organizations, the reason for you winning, and date of award, commendation or scholarship:

Name of community college, college or university you will be attending in the Fall 2009:

City: _____ State: _____

Which specific degree or certification will you be working towards?

EXTENUATING CIRCUMSTANCES

If there are extenuating circumstances that should be brought to the attention of the screening committee, in their consideration of this application, please explain:

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APPLICANT'S OATH & APPROVAL

AS AN APPLICANT FOR AN HPOA SCHOLARSHIP, I HEREBY CERTIFY THAT:

Applicant's Oath

1. I know of no reason why the school or college listed above would not accept me as a fulltime student in the Fall 2009.
2. I certify the accuracy and truthfulness of the facts contained in this application.
3. I understand that the scholarship is a **one-time** award that is limited to \$2,500 or a secondary scholarship of \$1,000 and if I should win the award, that the check will be made **payable only to the accredited college or university of my choosing**.
4. I understand that funding beyond this \$2,500 award or the \$1,000 award is not expressed, implied or expected.
5. I understand that the balance of my college expenses (tuition, books, lodging etc.) above the sum of the award is my responsibility, and not the responsibility of the Hispanic Police Officers Association.

Signature Date

ATTACHMENTS

1. A copy of your most recent transcript (H.S. or college)
 2. An original essay no more than 750 words explaining the applicant's scholastic and career goals concentrating on how the career they are seeking will assist them in positively contributing to society and the community in which they live.
 3. Three (3) letters of recommendation, including at least one from: (1) a school or community official, and (2) a person currently practicing in the applicant's current career area. These letters should specifically address your qualifications for this scholarship.
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Parent/Guardian Approval and Waiver

I, _____, as parent or legal guardian of the applicant named herein, approve of my dependent son or daughter's application for a Hispanic Police Officers Association Scholarship. In consideration of the benefits derived from this award, I agree that if my child/dependent should be awarded a scholarship, I hereby voluntarily waive any claim against the Hispanic Police Officers Association, its officers, members, or directors, for any and all causes that may arise as a result of being awarded this scholarship.

I CERTIFY that I am a full-time (sworn), paid employee of the Miami-Dade Police Department.

FURTHER, I CERTIFY that my son or daughter plans to attend an accredited Community college, college or university, in the fall of 2009 and that, thereafter, He or she plans to pursue a career in their chosen field.

Signature Date

Printed Name

Daytime Phone Number

****DEADLINE** – This application must be completed and received at the Hispanic Police Officers Association office by no later than **May 1, 2009**. Scholarship winners will be notified shortly thereafter. If you have any questions, please contact President Bill Hernandez of the HPOA at 305-345-6592.

Mail completed applications to:

Hispanic Police Officers Association
ATTN: Scholarship Committee
1470 NW 107 Avenue
Suite P
Doral, Florida 33172