Special Announcement
Children's Scholarship Program 2014

Dear Plan Participant:

We are again very pleased to announce a special **Children's Scholarship Program** that will be donated by our Long Term Disability Plan Administrators, California Administration Insurance Services, Inc.

Four scholarships will be given in two categories, 3 in Category One, and 1 in Category Two.

Category One
Applicants must be **high school seniors** who are enrolled or planning to enroll in a full-time course of study at an accredited two or four year college, university, or vocational-technical school. Applicants must also have a 3.0 grade point average on a 4.0 scale. (Three scholarships will be awarded.)

Category Two
Applicants must be **sophomores or juniors in college** enrolled in a full-time course of study at an accredited college, university or vocational-technical school. Applicants must have maintained a 3.0 grade point average during the first two years of college on a 4.0 scale. (One scholarship will be awarded.) Previous recipients are not eligible and need not apply.

Applicants must be the child of a CLEA Plan Participant who has been a Plan Participant for a minimum of one year prior to April 1, 2014 or a retired CLEA Plan Participant who is currently a Participant in the NPFBA Long Term Care program.

Scholarship distribution will consist of $2,000 - four awards of $500 each.

The application may be downloaded by going to California Law Enforcement Association's website CLEA.org or a hard copy may be requested by calling California Administration Insurance Services, Inc., toll-free at (800) 832-7333 ext. 6102. The application must be completed and **postmarked by April 1, 2014**.

This is a valuable opportunity to provide your children with scholarship money in order to help them attain their higher education goals! Act now.

Available only to the children of Participants in the California Law Enforcement Association

Children's Scholarship Program 2014

Instructions & Requirements

California Administration Insurance Services, Inc.

Is Proud To Sponsor A Children's Scholarship Program

For Participants in: The California Law Enforcement Association

By completing the information required in this application, you will enable our independent committee to determine your eligibility to receive funds provided to help students attain higher education.

You must complete your sections of this application and forward it to the person you have selected to complete the appraisal (page 3). You are encouraged to select a school counselor or teacher.

If any questions are not applicable to your current situation, please attach an explanatory note referring to the questions by section. If more space is required for information on any items, you may attach additional information. Please indicate appropriate sections.

You are responsible for seeing that all supporting documents are submitted. Our committee reserves the right to process only those applications found to be complete as of the application postmark deadline of April 1, 2014.

Remember, this application becomes valid only when the following have been submitted:

- Completed Student Application
- Transcript of Grades
- Step-children (birth certificate and marriage certificate of parent to Plan Participant).

To be eligible to apply for these scholarships, you must:

- Be a child or step-child of a California Law Enforcement Association (CLEA) Plan Participant who has a minimum of one-year Plan participation with the association as of the application deadline, or a retired CLEA Plan Participant who is currently a Participant in the NPFBA Long Term Care program.
    - Step-children — Please include a birth certificate and marriage certificate of parent to Plan Participant.

- Be a high school senior who is planning to enroll or a college sophomore or junior who is enrolled or planning to enroll in a full-time course of study at an accredited two- or four- year college, university, or vocational-technical school.

- Have a minimum of 3.0 grade point average on a 4.0 scale.

Postmark Deadline: April 1, 2014

Children's Scholarship Program

California Administration Insurance Services, Inc.

California Law Enforcement Association (CLEA)

APPLICANT DATA

Mr. ☐
Ms. ☐

_____ _____
Name (last) (first) (middle initial) (Social Security Number)

_____
Permanent Address (street) (city)

_____ (_____) _____
(state) (zip) (telephone number)

_____ _____
Date of Birth (month, day, year) Email

Name of parent/guardian _____

Department Name _____

Permanent mailing address of parent/guardian if different from applicant ❑ same as applicant

_____
(street) (city)

_____ (_____) _____
(state) (zip) (telephone number)

SCHOOL DATA

High School or College Attended _____ Graduation Date: Mo____ Yr_____

Address _____
(street) (city)

_____ (_____) _____
(state) (zip) (telephone number)

Name of High School Principal (N/A if in college) _____

Name of post-secondary school for which your scholarship is requested _____

4 yr College/University ☐ Vo-Tech ☐ _____
Community College ☐ Other ☐ _____

Address _____
(street) (city)

_____
(state) (zip)

Major field of study you plan to pursue _____

☐ Check here if you will be entering your junior or senior year in college.

PERSONAL DATA

Describe your work experience during the past 4 years. Indicate dates of employment in each job, and approximate number of hours worked each week.

Position	Date From (mo/yr)	Date To (mo/yr)	Hours Per Week	Hourly Rate

List all school activities in which you have participated during the past 4 years (e.g. clubs, church work, volunteer work). Indicate all special awards, honors.

Activity	No. of Years Partic	Special Awards, Honors	Activity	No. of Years Partic	Special Awards, Honors

Make a personal statement of your plans as they relate to your educational and career objectives and future goals.

Please report any unusual family or personal circumstances you feel warrant attention.

OTHER AWARDS

Please list below the names and amount(s) of all grants or scholarships that you have been awarded for the coming school years.

Name of Award	Amount	Granted	Pending

APPLICANT APPRAISAL (required)

To be filled out by a high school or college counselor or advisor, an instructor, professional person, or a supervisor.

You have been asked to provide information in support of this application for financial aid. Please give immediate and serious attention to the following statements. When complete, please return this form to applicant or make arrangements to mail form prior to deadline date.

The applicant's choice of a post-secondary education is
☐ extremely appropriate ☐ very appropriate ☐ moderately appropriate ☐ inappropriate

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The applicant's achievements reflect his/her ability
☐ extremely well ☐ very well ☐ moderately well ☐ not well

The applicant's ability to set realistic attainable goals
☐ excellent ☐ good ☐ fair ☐ poor

The quality of the applicant's commitment to school and community is
☐ excellent ☐ good ☐ fair ☐ poor

I know the applicant
☐ extremely well ☐ very well ☐ moderately well ☐ not well

Comments_____

_____ (____)_____

Appraiser's Signature Date Title Telephone Number

_____

Appraiser's Business and Address (street)

_____

(city) (state) (zip code)

TRANSCRIPT INFORMATION

Students must include a high school or college transcript of grades and have the following section completed by the appropriate school official.

Applicant ranks_____in a class of_____Cumulative grade point average_____/4.0 scale

_____ (____)_____

School Official's Signature Date Title Telephone Number

_____

School Address (street) (city) (state) (zip code)

APPLICATION CHECKLIST

This application for student aid becomes complete and valid only when you have returned the following materials (Two first class stamps are required for mailing):

- ☐ Student Application
- ☐ Transcript of High School or College Grades
- ☐ Postmark by April 1, 2014

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in disqualification.

Applicant's Signature_____Date_____

Return completed application postmarked by **April 1, 2014** to:

CALIFORNIA ADMINISTRATION INS. SERVICES, INC.
Scholarship Committee
1100 E. Hamilton Ave., Ste 2
Campbell, CA 95008