APCO Silent Key and CAC Scholarship Application

General Information

• Application must be filled out completely, in legible handwriting or by electronic means

• Application will be scored by the Institute Advisory Committee using the information contained in this application

• Information provided by applicant may be verified through applicant's employer

Applicant Information

Last Name	**First Name**	**Middle Name or Initial**
Mailing Address	**State/Province**	**Zip/Postal Code**
APCO Membership Number	**Home Phone Number**	**Cell Phone Number**
Email Address		

Current Employer

Agency Name	
Mailing Address State / Province Zip / Postal Code	
Applicant's Position Title / Years Employed Full or Part Time	
Work Phone Number / Work Fax Number	
Immediate Supervisor Agency / Department Head	
Number of Years in Public Safety Communications	**Have you earned APCO's professional designation of RPL?**

****FOR APCO INSTITUTE USE ONLY****

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Plans for Scholarship Money

Tell us how the money will be used if you are awarded a scholarship. Select your first choice, second choice and third choice, from the list below.

APCO Classes:
Student class (Specify) _____
Student class (Specify) _____
Student class (Specify) _____

Instructor class (Specify) _____
Instructor class (Specify) _____
Instructor class (Specify) _____

Other:
APCO Conference (Specify) _____

Jacksonville State University (Specify)_____

Maximum limits will be set each year based on the amount of funding available and number of applicants.

Commitment to Public Service

Please answer the following questions, in narrative form.

1. Describe your reason for applying for this scholarship.
2. Tell us what you hope to achieve if you recieve an award.
3. Where do you see yourself in five years? Ten years?
4. Describe any significant contribution you have made or would like make to Public Safety Communications.
5. What area(s) would you like to help change in Public Safety Communications?
6. Will your agency fund your training/travel request?

Resume

Include your current resume with this scholarship application.

MAIL OR FAX COMPLETED APPLICATION TO: APCO Institute 351 N. Williamson Blvd Daytona Beach, FL 32114-1112 Fax: 386-322-9766