

***D.A.R.E. to resist  
drugs and violence***



## MERCER COUNTY D.A.R.E. SCHOLARSHIP AWARD PROGRAM

Dear Applicant:

The Mercer County D.A.R.E. Program is offering a \$500 scholarship award to a graduating senior from each of the following schools: Mercer County and Sherrard. The applicant must plan to attend a two or four year college or university, or a vocational/technical school. The applicant must have graduated from an elementary D.A.R.E. program or participated in a junior high D.A.R.E. program. ***The applicant must be drug, alcohol and tobacco free.***

The attached scholarship award application must be completed and returned to the Mercer County Sheriff's Office at 906 SW 3<sup>rd</sup> Street, Aledo, IL 61231, by April 14<sup>th</sup>. Applications should be returned in an envelope marked "D.A.R.E. Scholarship".

Following the deadline for returning the application, the application, including essay and reference letters, will be reviewed by the D.A.R.E. Scholarship Committee, and the winners will be chosen. The D.A.R.E. Scholarship Committee will present the winners with an award letter from the Mercer County D.A.R.E. Board at the school's annual award ceremony.

## Mercer County D.A.R.E. Scholarship

Print clearly in ink or use a typewriter. Complete ALL of the blanks applicable to you in the form.

Last Name	First	Initial	/ /	Birthdate	Age	M    F
Home Address (Number, Street or Route)						(    ) -    -
City, Town, or Village						Zip
County				Social Security Number		
Parents/Guardians Name					High School	
Graduation Date	Grade Point Avg.		/		SAT/ACT Score	
Name of accredited school you will attend					City	State
<input type="checkbox"/> 2 year Community/Junior College			<input type="checkbox"/> 4 year College/University			<input type="checkbox"/> Vocational/Technical School

**Activities Information** – List all activities (school and community) in which you have participated listing any awards or honors received. Include any volunteer community service, especially any work that is related to the prevention of alcohol, tobacco or drug use by youth. You may attach a separate sheet if necessary.

Name/Description of Activity	Awards/Honors Received	Years Participated	Faculty or Other Adult Advisor

**Employment Information** – List all jobs you have held including a supervisor who can verify your employment. Briefly, describe your responsibilities and hours worked per week. You may attach a separate sheet if necessary.

Employer	Supervisor	Responsibilities	Employment Dates	Hours Per Week

**Essay** – Please attach an essay that includes the following: 1) Significant facts about you and your family. Families can include parents, grandparents, siblings, guardians, relatives and/or friends. 2) The course of study you are planning to follow. 3) Share your long range personal and career goals. 4) How you feel the problem with alcohol, tobacco and drug use will affect youth in the future and possible solutions. 5) Why this scholarship would be important to you.

**Recommendations** – Your application must include three written references from persons not related to you. We prefer that one be the principal or counselor at your school. You should also have one from a present or former teacher. The third should be from an adult in the community (4-H leader, Scout leader, church group leader, pastor, neighbor, etc.)

Their recommendation should include:

- 1) Your Name
- 2) How they know you
- 3) Comments on your personal character and your scholastic performance
- 4) What they consider to be your greatest attribute
- 5) How they rate your potential for future personal achievement
- 6) Any other comments they feel would be important to share about you

**I HEREBY CERTIFY THAT THE STATEMENTS HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I HAVE ENCLOSED A COPY OF THE FOLLOWING DOCUMENTS:**

\_\_\_\_\_ Verification of Admission \_\_\_\_\_ Letters of Recommendation \_\_\_\_\_ Essay  
to school you will attend

**I UNDERSTAND THAT IF ANY OF THESE DOCUMENTS ARE MISSING, MY APPLICATION WILL NOT BE PROCESSED.**

***PLEASE ANSWER THE FOLLOWING QUESTION HONESTLY. IT IS POSSIBLE THAT WE WILL CHECK WITH SCHOOL PERSONNEL OR MEMBERS OF YOUR COMMUNITY FOR VERIFICATION.***

***HAVE YOU EVER USED ALCOHOL, TOBACCO OR DRUGS?*** \_\_\_\_\_

*The Mercer County D.A.R.E. Board has the option to relinquish the scholarship before disbursement if the recipient commits or is convicted of any criminal offense. If the scholarship is relinquished from the winner, it will be awarded to the alternate.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Grade School Where You Graduated D.A.R.E.

**DISTRIBUTION OF SCHOLARSHIP:** The scholarship funds will be paid directly to the school on behalf of the recipient. The recipient must instruct the school he/she is attending to notify the Mercer County D.A.R.E. Board with written notification before scholarship will be paid. The total scholarship award will be divided as follows: ½ credited to the fall semester and ½ credited to the spring semester.

**IMPORTANT NOTICE:** The Mercer County D.A.R.E. Board scholarship is intended to assist full-time students with the cost of tuition, books and fees, housing or any other incurred expenses. Funds must be used during the regular school year and cannot be used for summer courses. All scholarship applicants will be notified by May 15, after the award winner at each school has been chosen.