



New Kent Public Safety Foundation Spring 2025 Scholarship

New Kent County Public Safety Members

This scholarship is intended to provide financial assistance to two New Kent County Public Safety Members, who are currently enrolled in one or more higher education courses, intended to advance their knowledge and skills as a New Kent County Public Safety Member.

Applications and supporting materials should be postmarked by June 15, 2025. Applications postmarked after June 15, 2025. will be returned to the applicant and will not be considered.

All applications should be mailed to:
PO Box 219, Quinton, VA 23141

Note: The award money may be used for: Fees or charges required for tuition; fees or charges for room and board while attending school; expenses for textbooks, course work, lab fees and other materials as required by a course instructor.

Please contact New Kent Public Safety Foundation with any questions.

newkentpublicsafetyfoundation@gmail.com

PO Box 219
Quinton, VA 23141

Criteria for Consideration:

- Applicants must currently be a New Kent Public Safety Member **and** must be currently enrolled in a higher education course intended to advance their knowledge and skills as a member of New Kent Public Safety.
- Evidence of membership and enrollment must be submitted and approved by a New Kent Public Safety Foundation Scholarship Committee Representative.

Each approved scholarship shall offer the awardee up to five hundred dollars (\$500) per award for the calendar year and shall be based on the following criteria:

- **I. Completion of this organization's scholarship application.**
 - 1. This application shall include-
 - Applicant information:
 - a. The applicant's full name
 - b. The applicant's address
 - c. The applicant's employing/appointing agency
 - d. The applicant's position within the agency
 - e. The applicant's dates of employment/appointment
 - 2. Program information:
 - a. The title of the training/educational opportunities being sought,
 - b. The certification to be conferred upon the applicant upon successful completion of this program,
 - c. How will this be beneficial to the agency and our community,
 - d. The dates of this program,
 - e. The location of this program,
 - f. The itemized cost of this program,
 - g. The prerequisites of this program,
 - h. Reassures that the applicant has previously met these prerequisites,
 - i. Assurances from the applicant that if funding is received from this organization that the applicant will maintain employment/appointment status within their agency for at least two (2) years or be responsible for immediate reimbursement of the entire approved scholarship amount to this organization,
 - j. An explanation from the applicant as to the reason for this request and why this request is not being funded by their agency,
 - k. The applicant shall acknowledge that upon completion of this program they shall provide the NKPSF with documentation of the successful completion and a copy of the certification received from this program.

- 3. Applicant's reassurances regarding understanding of the elements of this process and this application and signature.
 - a. The scholarship applicant shall complete said application and sign indicating the accuracy of their statements and their acknowledging that the applicant understands and agrees to the facts contained within this application.
 - b. The application shall be signed by the applicant and bear the signature and stamp of a Virginia Notary Public acknowledging the applicant's signature.
- 4. The application shall be accompanied by a summary of the requested training/educational program which has been provided by the providing party/organization of this program. This shall include the parameters of said program, associated costs for this program and the clear delineation of final benefits of this program upon successful completion of this program.
- **II. Submission of the applicant's official scholarship application:**
 - 1. Upon completion of the scholarship application the applicant shall submit the application for review and endorsement through their agency chain of command.
 - a. This endorsement shall include a review of the applicant's:
 - 1. Qualifications,
 - 2. prior training,
 - 3. status within the organization,
 - 4. abilities to successfully complete the project,
 - 5. and abilities to meet the agency's scheduling requirements if approved,
 - 6. The agency's requirements for such training in furthering the agency's mission.
 - 7. Endorsement of this application by the applicant's chain of command via signature of the final element in said chain.
 - 2. The endorsement of service representative of this organization on the Board of the New Kent Public Safety Foundation, indicating their agreement that the funding of these training/educational programs should be funded if funds are available.
 - 3. The submission of the application by the agency service representative to the Executive Committee of the New Kent Public Safety Committee.
- **III. Application process within the NKPSF:**
 - 1. The Executive Committee shall submit the application to the Scholarship Committee.
 - 2. The Scholarship Committee shall review and consider the application for approval as deemed appropriate.

- 3. Upon review and if approved by the Scholarship Committee the application shall be presented at the next NKPSF meeting for consideration by this body.
- 4. If the application is approved the application shall be forwarded to the CFO for payment of the approved funds to the appropriate entity.



New Kent Public Safety Foundation
Spring 2025 Scholarship Application
New Kent County Public Safety Members

First Name: _____ MI: ____ Last Name: _____

Date of Birth: ____/____/____ Phone Number: (____) _____ - _____

Email Address: _____

Permanent Address: _____

First Responder/First Receiver Agency Represented: _____

Current assignment: _____
Title/Duties/Section or Station

Dates of employment/appointment: _____

Request Information:

1. Title of training/educational opportunities sought:

2. Certification to be obtained upon successful completion:

3. How will this certification benefit your agency and our community?

4. What are the dates of this program? _____

5. What is the location at which this program will be held? _____

6. Please provide an itemized breakdown of the costs required for this program:

7. What are the prerequisites for this program (if any):

8. Has the applicant met these prerequisites prior to applying for this program (include proof):

Prerequisites met- (included) Prerequisites not met at this time – (plans to meet included)

9. Please explain why the costs of this program are not being provided by your agency currently:

(all responses can be expanded on to a separate page if necessary)

How did you learn about this scholarship? -----

Is there any additional information which may be of importance? -----

Applicant Signature: _____ Date: _____

For New Kent Public Safety Foundation Scholarship Committee Use Only:

Application Letter of Rec. Membership Verified Enrollment Verified Statement

Assurances by applicant:

I do hereby, with my signature affixed to this document, acknowledge that if funding for this program is received from the NKPSF Scholarship Program I understand and agree that I will maintain employment or appointment with my agency for at least two (2) years after the date of completion of this program or I shall be responsible for immediate reimbursement of the entire approved scholarship amount.

CERTIFICATION. ALL APPLICANTS:

I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to selection committees to review information on this form and any additional supporting documentation submitted as part of this application. I give permission for the selection committee to contact my agency for any additional information desired as a part of this application process. If chosen for a scholarship award, I agree to provide proof of successful completion of this program to the committee. I further agree if chosen to submit a written paragraph to be published on the value of the scholarship award in my academic pursuits. I acknowledge that this document must be signed in front of a Notary and bear the seal and signature of a Virginia Notary Public.

I, _____, acknowledge that the information contained in this document is true and accurate to the best of my knowledge and that I understand and agree to the elements of this application process.

Printed name of applicant: _____

Signature: _____ Date _____
Applicant's legal signature

State of Virginia

County of _____, to wit: I, _____, a Notary Public in and for the Commonwealth of Virginia, hereby certify that _____, whose name is signed to the foregoing writing, dated _____, has acknowledged the same before me in my presence in the aforesaid county and Commonwealth.

Given under my hand this the _____ day of _____, _____.

Notary Public Signature

Printed Name: _____

My Commission expires: _____ SEAL: