



Criminal Justice Scholarship  
QUESTIONNAIRE

Are you majoring in Criminal Justice?  YES  NO

CCC 2010-2011 Enrolling Grade Level \_\_\_\_\_

Will you be attending CCC as a full-time student?  Full-Time  Part-Time

Are you a returning Colby Community College student?  YES  NO

If you are a returning CCC Criminal Justice student, what was your GPA in Criminal Justice courses at the end of last semester? \_\_\_\_\_

Grade Level

Criminal Justice GPA

What was your last recorded cumulative GPA? \_\_\_\_\_

School

Grade Level

GPA

Please answer the following questions as best as you can:

Will you be a full-time student for both 2010-2011 semesters?  YES  NO

When will you graduate from CCC? (month/year) \_\_\_\_\_

Are you considering transferring and working towards a higher degree in a Criminal Justice related field?

If yes, where will you transfer? \_\_\_\_\_

What will your major be? \_\_\_\_\_

Are you planning to further your career in Thomas County or a surrounding area?

If yes, where? \_\_\_\_\_

In order of preference, what is your preferred career?

1.) \_\_\_\_\_ 2.) \_\_\_\_\_ 3.) \_\_\_\_\_

Have you ever pled guilty/been convicted of a criminal offense other than a traffic violation?

If yes, please answer charge:  Felony  Misdemeanor(MIP/DUI)

Disposition of the arrest:  Guilty by: \_\_\_\_\_

Dismissed

Community service then dismissal

Please describe the charge: \_\_\_\_\_

On a separate sheet of paper please provide a summary of your goals and explain why you think you should be one of the candidates to receive a Criminal Justice Scholarship. Please double-space your lines and limit your paper to approximately 500 words.

# Thomas County Community Foundation, Inc.

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## Criminal Justice Scholarship RELEASE OF INFORMATION

DATE: \_\_\_\_\_

LEGAL NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

DRIVER'S LICENSE NUMBER & U.S. STATE: \_\_\_\_\_

I certify that I am the person named above, and that the statements and answers supplied in my application for a Criminal Justice Scholarship are true, correct, accurate, and complete to the best of my knowledge. I understand that any and all information supplied on said application will be investigated by the Thomas County Community Foundation (TCCF) Scholarship Awards Committee with possible assistance from the Colby Police Department, and if any information is found to be incorrect, incomplete, or misleading in any particular way it will render me ineligible for consideration.

I hereby authorize any hospital or physician, any former employer, former educational institution, any City, County, State, or Federal agency to furnish to any member of the TCCF Scholarship Awards Committee, information concerning me necessary for the purpose of processing my application. A Photostat copy of this authorization shall be considered as valid as the original.

I further agree to hold harmless for any and all verifications, the City of Colby, Kansas, the Thomas County Community Foundation, Inc., Cory R. Wang Memorial Scholarship, Colby Police Department, Colby Community College, and any or all individuals proving the Committee with information regarding my scholarship application, by whatever means necessary, and request release of my academic and criminal records to the TCCF Scholarship Awards Committee.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date

Signed before me this \_\_\_\_\_ day of \_\_\_\_\_ 2010.

My commission expires \_\_\_\_\_.

## Thomas County Community Foundation Scholarship Guidelines

Recipients of scholarships from the Thomas County Community Foundation must adhere to the following guidelines before any money is received:

1. Give TCCF a copy of enrollment for each semester before the scholarship award is issued
2. Student must maintain a 3.0 grade point average and have no prior criminal record
3. Copy of grades must be sent to TCCF at the end of each semester
4. Scholarship checks will be made out jointly to the scholarship recipient and the accredited school attending
5. Any press coverage of the scholarship granted to the individual, must credit the appropriate fund at the Thomas County Community Foundation
6. If the scholarship money is not used solely for education, in full, at the accredited school, the remaining portion must be repaid to TCCF

I \_\_\_\_\_, recipient of the Cory R. Wang Scholarship for the school term of \_\_\_\_\_ agree to adhere to the above guidelines with the Thomas County Community Foundation to receive the designated money.

Date: \_\_\_\_\_

Please sign and return to TCCF.

3/2010 cfs