Application 2014 ILLINOIS SHERIFFS' ASSOCIATION

Please **type** or **print** your answers. If application is illegible it will be returned to you.

1. Last Name: First Name:

2. Mailing Address:
   Street: _____
   City: County State: ZIP:

3. Daytime Telephone Number: ( )

4. Date of Birth: Month Day Year

5. Social Security Number: Email:

6. In the Fall of 2014, I will be attending college as a: (Circle one)

   Freshman Sophomore Junior Senior Master's Level Technical School Student

   Medical School Student Nursing School Student (year _____) Other: _____

7. I will be attending the following **ILLINOIS** school in the Fall of 2014: _____

   Proof of current student enrollment from the above school, in writing, is required by September 12, 2014.

8. Grade Point Average (GPA): _____ (On a 4.0 scale)
   Attach proof of GPA.

9. ACT Score: _____
   Or
   SAT Score: _____
   A copy of your ACT **or** SAT score sheet is required for incoming college **Freshmen** only.

10. Name and city of high school attended: | Year graduated

11. List the name of any college you have attended. (If you have not attended college yet, go on to question12.)

	Year Began	Year Ended	Year Graduated (if applicable)	Type of Degree Received (if applicable)
A.				
B.				
C.				

12. What specialty/major do you plan to major in as you continue your education?