

**Boston Police Patrolmen's Association  
Scholarship Award Entry Form**

Name of Student: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Name of Parent who is an active member, in good standing, of the BPPA:

\_\_\_\_\_ Area/District \_\_\_\_\_

Union Use Only

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

**Entries must be received at the BPPA by Monday, November 14, 2016**