



**MASSACHUSETTS
ASSOCIATION OF WOMEN
IN LAW ENFORCEMENT**

25 Dorchester St
PO Box #52031
Boston, MA 02205

www.mawle.org
Non-Profit §501(c) (3)

Lieutenant June T. Murphy Scholarship

Application

**TYPE OR PRINT ALL INFORMATION
EXCEPT FOR SIGNATURES**

APPLICANT INFORMATION

Applicant's Name:	Last, First, MI		
Applicant's Contact #/Email:			Parent's Contact #/Email:
Parent/Guardian's Name:	Last, First		
Home Address: (Number, street, city/town, state, zip code)			
Date of Birth: (month/day/year)	Social Security Number:	Applicant's Contact Number:	

SCHOOL INFORMATION

High School:		Graduation Date (month/year)	
HS School Address: (Number, street, city/town, state, zip code)			
College/University:			
College Address: (Number, street, city/town, state, zip code)			
<input type="checkbox"/> 4-year College/University (Check one)	<input type="checkbox"/> 2-year College	<input type="checkbox"/> Vocational/Technical	<input type="checkbox"/> other-
Are you a legal US Citizen? (Check one)	<input type="checkbox"/> YES <input type="checkbox"/> NO		

MAWLE CONNECTION: Preference is given to MAWLE member's daughters, but we encourage all to apply.

Member's Name:	Last, First	Applicant's relationship:
Member's Agency:	Member Contact #/Email:	Yrs Member:

CERTIFICATION

I certify that all the answers I have given in this application, and attached documents relating to the application of MAWLE's **Lieutenant June T. Murphy Scholarship**, are complete and accurate to the best of my knowledge. I understand that scholarship funds must be used toward tuition, fees, books, and/or room and board. Falsification of information may result in termination of any scholarship granted. I understand by accepting the scholarship I am giving MAWLE permission to use my name and picture in all MAWLE related publications and social media sites.

Applicant's Signature: _____ **Date:** _____

Parent/Guardian's Signature: _____ **Date:** _____

MAWLE Member's Signature: _____ **Date:** _____

*If space provided in any section proves inadequate, information may be continued on additional sheets of paper and attached to the application. Do not repeat information already reported on the application form. **Application must be postmark by first Friday of April.***