Wisconsin Correctional Association

2024 Scholarship Award Program Application

PURPOSE

The WCA Scholarship Program is designed to assist WCA members (or their spouses/dependents) who are pursuing a university or technical college degree or program certificate. FOUR scholarships are available. Two of the WCA scholarships are designed to assist WCA members (or their spouses/dependents) who are pursuing a university or technical degree or program certificate in criminal justice or a related field. Two of the WCA Scholarships will be awarded to pursue a university or technical degree or program certificate in any field of study.

AMOUNT

Four scholarships are granted:

1. **Two** $1,000 scholarships in Criminal Justice or related field. Recipients must provide verification of enrollment in an accredited university or technical college.
2. **Two** $500 scholarship in any field of study. Recipients must provide verification of enrollment in an accredited university or technical college.

ELIGIBILITY

* Applicant must be a US Citizen.
* Applicant must be an active WCA member,

member’s spouse or member’s dependent.

* Applicant must be pursuing (full or part-time) graduate, undergraduate, technical degree or program certificate by September 01, 2024.
* Applicant must be entering their freshman, sophomore, junior, senior year or graduate school.
* First year students must have been officially accepted by the college/university they plan to attend.

APPLICATION

Applicants must complete the application form, provide all required attachments, and email the entire package to [Kari.Ives@wisconsin.gov](mailto:Kari.Ives@wisconsin.gov)

**no later than June 30, 2024.** Incomplete application packages will not be accepted for consideration.

SELECTION

The WCA Scholarship Committee will select scholarship recipients with approval by the WCA Executive Board of Directors. Criteria for selection will include: academic record; school, community or association activities; and the applicant’s statement of interest in and commitment to pursuing further education according to eligibility guidelines. Recipients will be notified in writing and awards will be presented at the WCA Annual Training Conference on October 01, 2024, at the Hilton Appleton Paper Valley in Appleton.

For further information, please contact Kari Ives at [Kari.Ives@wisconsin.gov](mailto:Kari.Ives@wisconsin.gov)

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**WCA 2024 Scholarship Application Form**

1. **Name:** Last:       First:       M.I.
2. **Address:** Street:       City/State/Zip:

Telephone:       Email:

1. **Name of University or Technical College:**
2. **Current Class (check applicable box):**

High School Senior  College Sophomore  College Senior

College Freshman  College Junior  Graduate

1. **I am applying for the:**

$1000 award  $500 award

*(Criminal Justice or related field of study*) (*Any field of study)*

1. **Status for Fall 2024 Term (check applicable box):**

College Freshman  College Junior  Graduate

College Sophomore  College Senior

1. **High school(s) attended by years and date of graduation:**

1. **Colleges attended by years (if any) and date of graduation:**

1. **School, Community, and/or Professional Associations involvement, volunteerism and activities/hobbies (include dates of participation, past and present):**

1. **On a separate document, please respond to the following questions:**
2. What are your career goals?
3. What motivates your interest in this career and what challenges do you anticipate?
4. What characteristics do you possess that will help you be successful in your chosen field?

If applying as a WCA member or spouse, please complete 11-15 and skip questions 16 through 18.

If applying as a dependent child of a WCA member, please complete questions 16 through 18 and skip 11 through 15.

**COMPLETE THIS SECTION FOR WCA MEMBER OR SPOUSE APPLICANT**

1. **If married, spouse’s occupation:**

**12. Number of dependents:**

**13. WCA Membership number:**

**14. Scholastic Record:** High School Class Rank:       College GPA (if any):

**15. List all other current year scholarships, including federal and state grants (e.g. PELL, SEOG,WHEG) received or applied for, and amounts:**

**COMPLETE THIS SECTION FOR DEPENDENT CHILD APPLICANT**

**16. Father’s Information:**

Full Name:

Address:

Occupation:

WCA member name and relationship:

Membership number:      

**17. Mother’s Information:**

Full Name:

Address:

Occupation:

WCA member name and relationship:

Membership number:

**18. List other current year scholarship/grants received or applied for, and amounts (if any):**

All information submitted is true and accurate. I authorize WCA Scholarship committee to verify the information contained in this application package

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Date Signature of Applicant

Signature of Parent, spouse, or guardian if applicant is a dependent of WCA member.

Note: Applicants may be asked to provide additional information.

**Attachments/supplements to application:**

1. A cover letter of introduction; tell us a little about yourself and your connection to WCA.
2. Your response to questions 10A, 10B, and 10C.
3. As a beginning freshman, you must submit an official transcript of your high school grades to date along with a copy of your official letter of admission from the college or university.
4. If already in college, you must submit an official transcript of your college course and grades to date.
5. If you are entering graduate school, you must submit an official transcript of your undergraduate grades along with a copy of your official letter of admission from the college or university.
6. Submit your completed application and required attachments to the address below **no later than** **June 30, 2024.**  Incomplete application packages will not be accepted for consideration.