



Chief John J. McGowan III *Memorial Scholarship Foundation*

chiefmcgowanfoundation.org

PO Box 1861, Horsham, PA 19044

SCHOLARSHIP APPLICATION FORM

(Please Type or Print)

Name of Applicant: _____ Date: _____

Applicant's Street Address: _____

City, State, Zip: _____

Telephone No: _____

E-mail Address: _____

Scholastic Record

High School: _____ City, State _____

Undergraduate
degree from: _____ City, State _____

Highest Degree Completed (circle): Associate's, Bachelor's, Master's, Other:
at (name of the school): _____

Major Field of Study: _____

Anticipated Completion Date of the
Police Academy Program: _____

