



## Albany Police Activities League Scholarship Application

*Please type your answers in the spaces provided below:*

First Name	Last Name	Age
<hr/>		
Address	City	Zip
<hr/>		
Phone	Email Address	
<hr/>		
High School		
<hr/>		

*Honors, Distinctions, Awards, and/or Recognitions Received:*

*Please share with the committee your interests, community service, and current activities.*

*Please share your plans for your continuing education and future goals.*

**REFERENCE:** Please include with your application a letter of recommendation from someone who has had the opportunity to observe your leadership, character, industry, purposefulness, or disposition. We suggest they write on these attributes.

**DEADLINES:** Completed application and letter of recommendation in PDF format must be submitted by March 29, 2024 to the Albany Police Activities League Scholarship Committee, [apal@albanyal.net](mailto:apal@albanyal.net)

**QUESTIONS:** Any questions should be directed to the Albany Police Activities League Scholarship Committee at: [apal@albanyal.net](mailto:apal@albanyal.net)