Thank you for your interest in Blue Friday of New York and The Father James Lefebvre Memorial Scholarship. Blue Friday was established to help to assist the families of law enforcement officers who are killed or seriously injured in the line of duty, as well as the families of officers who have died outside the line of duty if needed and honor all those who protect and serve. This scholarship was created in an effort to assist law enforcement families.

**The Father James Lefebvre Memorial Scholarship Information**

Blue Friday of New York will issue a college scholarship of One Thousand Dollars ($1000), once per year, to two individuals. This money will be paid directly to the college of the selected applicant. This information will be confirmed with the selected applicant prior to being awarded. The recipient will be selected from the pool of applicants primarily based on the accuracy and quality of an essay (500-750 words), the topic of which will be determined each year. However, the committee may consider all submitted information.

To be eligible, the applicant **must**:

Not have been the recipient of The Father James Lefebvre Memorial Scholarship in the past.

Be an immediate relative of a Law Enforcement Officer (LEO) employed by an agency located within the Blue Friday of New York catchment area (New York State, North of the Tappan Zee Bridge to the Canadian Border, and East of Interstate 81 to the borders of Massachusetts, Connecticut, and Vermont.)

Supply proof of the relationship (e.g. birth or marriage certificate) and LEO employment/status (e.g. copy of Agency ID) must be submitted with the application.

Have a minimum overall Grade Point Average (GPA) of C+/75 with a minimum GPA of C/70 for all marking periods within the year prior.

Submit an academic or professional recommendation.

Submit a 500-750 word essay on the topic selected by Blue Friday of New York. As the scholarship will be competitive, please remember to check your essay for editorial oversights.

Be registered or accepted at an accredited college or university. Proof must be submitted upon selection.

All forms and documents must be submitted by mail to the below address and postmarked by April 20, 2023:

2023 Blue Friday of New York Scholarship Topic:

 **Pros & Cons of Wearable Body Cameras in Police Work**

**The Father James Lefebvre Scholarship Application**

***Eligibility: To be eligible, the applicant must be the daughter, son, or immediate relative of an active or retired Law Enforcement Officer (LEO). Proof of relationship, and LEO status must accompany this application.***

**Attachments: This application must be submitted with the following attachments:**

1. **Above mentioned eligibility documents**
2. **Essay (500-750 words) meeting the outlined specifications**
3. **High school transcript**
4. **Proof of college acceptance or enrollment**
5. **Academic *or* professional recommendation**

**Student Info:**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate/Cell # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School(s) to Attend: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intended Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LEO Info:**

LEO Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LEO Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Agency Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/Town & Contact # **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I attest that all information included in and with this application is true and accurate to the best of my knowledge and all included work is my own.**

**Applicant signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**