<u>Police Community Relations</u> <u>Criminal Justice Scholarship</u>

Address	
Telephone	
Birth Date	Social Security #
Gender (M/F)	Race/Ethnicity (optional)
Driver's License #_	
Name of High Scho	ool
Date of Graduation	
Major Course of St	udy
,	e two letters of reference)
Name	
Fmnlover	
Phone	
	PateDate
Applicant Signatur (By signing this for Commission to obto	E

to:

Sgt. John Weatherwax

Sgt. John Weatherwax
Holland Police Department
89 West 8th Street
Holland, Michigan 49423

^{*}If you have any questions, please call Sgt. Weatherwax at 355-1176.

^{*}Completed applications must be postmarked by May 31th, 2022. Incomplete and late applications WILL NOT be considered.