



**LEWIS COUNTY SHERIFF'S OFFICE ASSOCIATION  
SCHOLARSHIP APPLICATION**

**\$1000 SCHOLARSHIP OF EXCELLENCE**

TO: Applying Student residing in Lewis County

RE: \$1000 LCSOA Membership Scholarship for 2026/2027 School Year

**ELIGIBILITY:**

Applicants must qualify in one of the following two areas:

- Active Lewis County Sheriff's Office Association member or a volunteer of the Lewis County Sheriff's Office, and a high school senior or a full-time student enrolled in a baccalaureate program, associate degree program, or vocational/technical certification program residing in Lewis County.
- Child or spouse of an active Lewis County Sheriff's Office Association member or Lewis County Sheriff's Office volunteer who is a high school senior or a full-time student enrolled in a baccalaureate program, associate degree program, or vocational/technical certification program residing in Lewis County.

The scholarship recipient must be enrolled in a baccalaureate program, associate degree program, or vocational/technical certification program at the time of issuance of the scholarship award. After verification of enrollment, a check will be forwarded to the recipient's school of choice.

**REQUIREMENTS:**

To be considered, you must submit the following:

- Completed scholarship application.
- Personal essay (limit 500 words).
- Transcript of your high school and/or college grades.
- SAT or ACT scores- not required but will increase your score.
- One signed letter of recommendation.
- List of honors/awards, community service, organizations involved, extra-curricular activities and work history.
- Plan to enroll or actually be enrolled full-time as a college student, 12 credits per quarter or equivalent for semester.
- Must not be a previous recipient of any LCSOA Scholarship Awards.

**APPLICATION DEADLINE:**

Applications must be postmarked no later than **April 15, 2026**. Mail completed application to:

**LCSOA  
PO Box 462  
Chehalis, WA 98532**

Applications will be rated on their GPA and SAT/ACT scores; essay (judged on originality, grammar, spelling and punctuation); and extra-curricular activities (including academic prizes, awards, hobbies, community involvement, and work history).

- GPA & SAT/ACT Scores – Points Possible 34
- Essay – Points Possible 33
- Extra-Curricular Activities (Community Service, Honors/Awards, Work History, Organizations Involved, Etc.) – Points Possible 33

The scholarship recipient will be notified by mail prior to **May 5, 2026**. Recipient must provide proof of enrollment to the LCSOA prior to a check being forwarded to the recipient's school of choice.

Good luck!



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*TYPE OR PRINT CLEARLY*

Check your current academic status:  High School Senior  
 Full-Time College Student  
 Part-Time College Student  
 Full-Time Vocation/Technical Program  
 Other: (List) \_\_\_\_\_

Full Name: \_\_\_\_\_

Sponsoring Association Member: \_\_\_\_\_  
\_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of education institution enrolled or planning to enroll in:  
\_\_\_\_\_

Major/Degree: \_\_\_\_\_

**LIST THREE PERSONAL REFERENCES:**

1) Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

2) Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

3) Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**HONORS/AWARDS, COMMUNITY SERVICE, ORGANIZATIONS INVOLVED, EXTRA-CURRICULAR ACTIVITIES & WORK HISTORY:**

List on a separate sheet of paper all honors and awards received, community service activities and organizations you are involved in, along with your extra-curricular activities and work history.

**PERSONAL ESSAY:**

To complete your scholarship application, please write a brief essay (limit 500 words) about yourself, including a statement about your educational and career goals, and how you plan to achieve these goals. Include any information you think will help the scholarship committee reach a decision.

**CERTIFICATION:**

I certify the information in this application is complete and accurate to the best of my knowledge and belief. I authorize the release of my education records for scholarship purposes, and the release of my name for LCSOA media recognition.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_