



## ASIS Foundation, Inc. Scholarship Application

### Eligibility

1. Open to ASIS members and other students of merit who are interested in the security profession as determined by individual chapter criteria.
2. A minimum grade point of 3.0 (on a 4.0 scale) is required for graduate students. Undergraduate grade point requirement set by local ASIS chapter.
3. Applicants may be part-time or full-time students at an accredited college, university or community college. This does not apply to ASIS members who are taking professional development courses.
4. Matching scholarships will be awarded on a calendar year basis, January 1 through December 31, one per chapter per year.

### Student Requirements

1. Complete and submit **application** to chapter.
2. Submit **transcript** to chapter.
3. Submit faculty member **letter of recommendation** to chapter.

### Chapter Requirements

1. Send copy of application, transcript and letter of recommendation to the ASIS Foundation, 1625 Prince Street, Alexandria, VA 22305
2. Include a check for the chapter's contribution to the scholarship. Check should be made out to the ASIS Foundation.
3. Send Regional Vice President a copy of the application for the matching scholarship winner.

**Applicant Information**

Name \_\_\_\_\_

SSN# \_\_\_\_\_ Home Telephone \_\_\_\_\_

Home Address \_\_\_\_\_

E-mail address \_\_\_\_\_

College Name \_\_\_\_\_

College Address \_\_\_\_\_

College Telephone number \_\_\_\_\_

Major \_\_\_\_\_

Name and phone number of faculty member sending recommendation \_\_\_\_\_

Cumulative grade point average (also submit an official copy of your transcript) \_\_\_\_\_

Current and/or previous security or related work experience

Future Career Plans

Future Academic Plans( advanced degrees, courses, etc.)

Academic and/or professional memberships

Briefly explain you interest in the security profession

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date

**FOR CHAPTER USE ONLY**  
**CHAPTER REQUIREMENTS CHECKLIST**

- \_\_\_\_\_ 1. Ensure student requirements have been met  
(**Transcript, letter of recommendation, and completed application form**)
- \_\_\_\_\_ 2. Select one scholarship winner for Foundation match.
- \_\_\_\_\_ 3. Ensure all award checks are processed through the ASIS Foundation, Inc. Headquarters to IRS compliance purposes.
- \_\_\_\_\_ 4. Send copy of application and supporting documents for all award recipients to ASIS Foundation Inc. Headquarters.
- \_\_\_\_\_ 5. Send the Regional Vice President a copy of the application for the matching scholarship winner.
- \_\_\_\_\_ 6. Acknowledge receipt of candidate's application.

Chapter Statement

- 1. Is this your one chapter matching scholarship selection? Yes\_\_\_ No \_\_\_
- 2. Is the matching scholarship winner an ASIS Chapter Member? Yes\_\_\_ No\_\_\_  
(**Not a Student member**)
- 3. In order for your candidate to receive the one matching scholarship and/or be eligible of the Regional Vice President award the following statement is required:

“I attest to the fact that \_\_\_\_\_ has met the minimum selection requirements as  
(Name of winner)  
stated in the ASIS Foundation, Inc Scholarship Policy for the awarding of the \_\_\_\_\_ matching  
(Year)  
scholarship from Chapter \_\_\_\_\_”  
(Chapter name and number)

\_\_\_\_\_  
Signature of Chapter Chairman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chapter Chair Name (printed)

Requested date to receive check (day of awards presentation): \_\_\_\_\_

Send check to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_