

Heroes Helping
2025 Scholarship Application

The Atchison Police Department's Heroes Helping program was started in 2020 by Officer Alex Moore in an effort to provide school supplies and shoes to children who might otherwise go without. Heroes Helping has funded this program through the annual "Heroes Helping Golf Tournament" along with private donations from community members and local businesses.

Heroes Helping is offering a scholarship opportunity for eligible students at the following schools: Atchison High School, Maur Hill-Mount Academy, and Atchison County Community High School. The scholarship provides financial assistance to scholarship winners for their continued education. **For 2025, Heroes Helping will offer a total of six scholarships. Two $500 scholarships to selected students at each of the three local schools.** All applicants must meet the requirements and criteria listed below.

All applicants must meet the following requirements:
1. Enrolled as a student in a high school in Atchison County, Kansas.
2. Graduation from one of the three local High Schools in the 2025 school year
3. Continuing your education at a vocational school or a 2-4 year college.
4. Must complete a 250-500 word essay. Explained on page 4 of the application.
5. Obtain a recommendation from a community member.

Criteria for judging applications:
1. Quality of Essay
2. Participation in extracurricular activities or community service.
3. Recommendation from a community member. (Use form provided.)

To apply, complete the attached scholarship application. Please type or print clearly. All applications must be submitted to Heroes Helping at 515 Kansas Avenue, Atchison, KS 66002, and postmarked no later than April 15, 2025.

Verification of enrollment from a vocational-technical school, 2- or 4-year college of your choice will be needed in order to release any scholarship funds awarded. If a scholarship winner

chooses not to continue his or her education after high school, the scholarship award will not be awarded to that individual. Recipients have 12 months from the awarding of the scholarship to access the money. Unclaimed funds will be made available to future scholarship applicants.

Heroes Helping Scholarship Application Form
Personal Information

Name_____

Address_____

Phone_____

School_____

Current Grade in School/year graduating_____

Future education plans_____

Name of person giving a recommendation_____

Parents_____

Extracurricular Activities

Provide a brief description of any extracurricular school activities or community activities with which you have been involved in.

Activity	Your Role and Responsibilities
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Recommendation Form

Applicant's Name:_____

Please rate the applicant on the following using the scale provided.

Outstanding – 1 Excellent – 2 Good – 3 Needs Improvement – 4

_____ **Honesty and integrity**

_____ **Discipline and mutual respect**

_____ **Commitment and attention to consistency and detail**

_____ **Creativity and imagination in problem solving**

_____ **Quest for improvement and knowledge**

_____ **Camaraderie and good sportsmanship**

_____ **Maximization of potential**

Please provide a recommendation stating how you know this student, and what you believe the student's strengths and weaknesses might be. Why is this student worthy of the scholarship?

_____

_____

_____

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_____

Reference Name:_____

Signature:_____ **Date**_____

*Please return to student in sealed envelope

ESSAY

Write an essay on one of the following topics:

Any challenges or obstacles you have delt with and overcome in life, and how this will help you succeed in school and beyond.
Describe how volunteering, community service or extra-curricular activities have shaped who you are today, and what it has taught you.
May also include future educational plans and career goals. (250-500 words)

<u>All applications must be postmarked by April 15, 2025.</u>

Parent Release Form

I,_____, hereby consent to _____
(PARENT/ GUARDIAN NAME) **(APPLICANT NAME)**

completing the application for the Heroes Helping scholarship program.

_____ _____
Parent/ Guardian Signature Date

Submit all of the above to:

Heroes Helping with the Atchison Police Department
515 Kansas Avenue
Atchison, Kansas 66002