



# Louisiana Heroes Scholarship Application Form

The Louisiana Heroes Scholarship Fund was created by Scott J. Chafin, Jr. and Gregorio Chafin, LLC

Deadline May 31, 2024

## Qualifications for the Scholarship

1. Are you a Louisiana resident? Yes  No
2. Are you the child of a law enforcement officer, first responder, teacher, or coach employed by a Louisiana public school system? (A first responder is a person with specialized training who is among the first to arrive and provide assistance at the scene of an emergency, such as an accident, natural disaster, or terrorist attack. A first responder does not include hospital personnel.) Yes  No
3. Do you have a minimum GPA of 2.5? Yes  No
4. Are you on track to graduate from high school this academic year or are a currently enrolled college or vocational student in a Louisiana institution? Yes  No

If you answered yes to questions 1-4, then you meet the eligibility requirements for this scholarship.

## Applicant Information

Full Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

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

Parent/Guardian \_\_\_\_\_ Phone: \_\_\_\_\_

Parent Email \_\_\_\_\_

## Parent/Legal Guardian(s)

Name Occupation Highest Level of Education

\_\_\_\_\_  
\_\_\_\_\_

With whom do you live?  Both parents  Mother  Father  Other (Explain)

What is the total household income where you reside?

- Under \$20,000  \$20,000-\$40,000  \$40,000-\$60,000  \$60,000-\$80,000  \$80,000-\$100,000  
 Over \$100,000

### Siblings

Name	Age	Highest Level of Education	Does this sibling live in the home?
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### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

GPA: \_\_\_\_\_ Class Rank/Size: \_\_\_\_\_ ACT Score \_\_\_\_\_ SAT \_\_\_\_\_

Will you graduate? YES  NO  Diploma Type: \_\_\_\_\_

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

GPA: \_\_\_\_\_ Fulltime Student Status: YES  NO  N/A

What is your major? \_\_\_\_\_

What are your career goals? \_\_\_\_\_

Will you be living on campus? YES  NO  If no, where will you live? \_\_\_\_\_

Will you be working while attending college? YES  NO  If yes, how many hours per week? \_\_\_\_\_

Have you been awarded any other scholarships, including TOPS? YES  NO

If yes, please list the name of the scholarship and the amount. \_\_\_\_\_

\_\_\_\_\_

Please explain your financial need for this scholarship \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Activities

*If your resume or activities sheet answer the items below, please attach and skip this section.*

List any High School awards, honors, extracurricular activities, and volunteer/community service during the past four (4) years:

\_\_\_\_\_

\_\_\_\_\_

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**Previous Employment**

*If your resume answers the items below, please attach and skip this section*

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

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

Job Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Other employment: \_\_\_\_\_

**Additional Requirements for this Scholarship**

Did you submit a copy of your High School or College Transcript? If awarded the scholarship, then an official copy will be required. YES  NO

Did you submit two (2) letters of recommendation? YES  NO

Did you submit documentation for your ACT score? If awarded the scholarship, then an official copy from your school will be required. YES  NO

Did you submit documentation that your parent or guardian is a Louisiana Hero (such as a letter from the supervisor or principal)? YES  NO

Did you submit a short essay answering the following question: Please describe in two (2) pages or less the parent or guardian that qualifies you for this scholarship as well as what this scholarship would mean to you. YES  NO

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.* YES  NO

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

Once completed, mail your application packet to:  
Louisiana Heroes' Scholarship Fund  
9284 Linwood Avenue  
Shreveport, LA 71106

If you have any questions about the application, please contact Marianne Boston at 318-865-8680 or by email at mboston@gcj-law.com.