Palm Beach Police
& Fire Foundation

SCHOLARSHIP FUND APPLICATION

RENEWAL APPLICATION 2026-2027 ACADEMIC YEAR

PART I PRELIMINARY STUDENT APPLICANT INFORMATION (Due March 1st)

Student Name

Permanent Address

Student Email | Home Phone | Cell

Current College/University | Expected Graduation Date

Anticipated college level as of fall semester 2025 | Number of years you have ALREADY received this scholarship | Student ID Number

PART II (Due May 1st)

College/University Name (If different from above) | School Phone

School Address | Student ID Number

PLEASE ATTACH CURRENT TRANSCRIPT WITH OVERALL GPA FROM EVERY COLLEGE/UNIVERSITY WHICH APPLICANT HAS ATTENDED.

Palm Beach Police & Fire Foundation

SCHOLARSHIP FUND APPLICATION (CON'T)

RENEWAL APPLICATION 2026-2027 ACADEMIC YEAR

Please describe your educational & professional goals.

Please list any other scholarships or financial aid you are receiving including FAFSA, Florida Prepaid, or any other sources – this is a requirement, and checks will not be released until correct aid information is provided.

Please list your total anticipated cost for this academic year:

Tuition	Room & Board	Books and Supplies:	School-Related Travel	Other

Please list/describe any extracurricular activities and/or community service—as well as any other demonstrations of civic and social responsibility.

Please provide a brief quote about the importance of receiving this scholarship and what it will mean to you. (May be used anonymously on our website)

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SCHOLARSHIP FUND APPLICATION (CON'T)

RENEWAL APPLICATION 2026-2027 ACADEMIC YEAR

Please tell us how you would like the scholarship money to be allocated. (ie.: Fall Semester/Spring Semester)

Student Signature

Date

PART III EMPLOYEE INFORMATION

Name

Occupation/Title

Years of employment

Hire Date

Email

Home Phone

Work Phone

Cell

I certify that the applicant is a dependent, unmarried child under the age of 26 who is either naturally related to, or legally dependent upon, or adopted by me:

Employee Signature

Date

RETURN THIS COMPLETED PRELIMINARY APPLICATION, BIRTH CERTIFICATE IN A SEALED ENVELOPE, TO NICOLE DOWNIE 345 S. COUNTY ROAD, PALM BEACH, FL 33480 OR MARSHA FARMER 300 N. COUNTY ROAD, PALM BEACH FL, 33480 NO LATER THAN 5:00 P.M. ON MARCH 1ST OF THE APPLICATION YEAR.