

2025-26

Hundred Club of Broward County, Inc. Scholarship

Criteria for Consideration

➤ **Dependents of Deceased or Disabled Law Enforcement Officers, Firefighters, or Peace Officers**

- Student must be a dependent, spouse, or child of a deceased or disabled Broward County law enforcement officer, firefighter, or peace officer
- Minimum Cumulative Grade Point Average (GPA) 2.0
- **Degree-seeking and enrolled at least half-time (6 credit hours)**
- Award of up to \$5000 per academic year to include, but not limited to, all “cost of education” expenses such as tuition, fees, books, parking, transportation, childcare, housing and living expenses.
- Note that receipt of an award from this scholarship program may affect other need-based financial aid a student may be receiving based on results of the Free Application for Federal Student Aid (FAFSA)

➤ **Dependents of Living Law Enforcement Officers, Firefighters, or Peace Officers**

- Student must be a dependent, spouse, or child of a living Broward County law enforcement officer, firefighter, or peace officer
- Minimum Cumulative Grade Point Average (GPA) 2.0
- **Degree-seeking and enrolled at least half-time (6 credit hours)**
- Award of up to \$1000 per academic year

➤ **Emergency Financial Assistance**

- **Up to \$1000 per semester above regular maximum award for documented emergencies, pending availability of funds**
- **May affect other need-based financial aid**

Special Note: Funding is limited and priority for the academic year (fall/spring) will be given to students whose application and documentation are received by July 1st.

Complete this form electronically, using Adobe Reader 5.0 or Higher.



Division of Enrollment Management
Office of Student Financial Aid and Scholarships

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* You must type in the student's name and 8-Digit UFID before printing! SFA cannot accept digital signatures.

The Hundred Club of Broward County, Inc. Scholarship 2025-2026 Application

Name _____ UFID # _____

Permanent Address _____
Street Address or PO Box

City _____ State _____ Zip _____

Permanent Phone (_____) _____ Cell Phone (_____) _____

Name of Qualifying Broward County Law Enforcement Officer, Peace Officer, Firefighter or Veteran:

Qualifying Agency or Status: (check one) Law Enforcement/Peace Officer Firefighter

Student's Status: Dependent of a Deceased or Disabled Broward County Law Enforcement Officer, Firefighter, or Peace Officer
 Dependent of a Currently Employed Broward County Law Enforcement Officer, Firefighter, or Peace Officer

Note: Documentation of officer's disability or death (agency letter or copy of dated obituary notice), or verification of current employment (position and dates) from agency human resources office, generally in the form of a letter on agency letterhead, is required with application. Please indicate student's name on all correspondence.

Student's Certification Statement

I understand that if I have purposefully given false information on this form, I will not be eligible for scholarship consideration. Furthermore, if I receive a scholarship and it is subsequently determined that I have purposefully given false information in order to receive a scholarship, I agree to repay the scholarship monies and pay an additional fee representing 10% simple interest, per year, on the monies I have received. I also understand that the number of scholarships awarded varies per year based on available funding and that application is no guarantee of a scholarship award.

Student Signature

Date

For **priority** consideration, submit completed application and proof of parent's current employment dates, disability date or copy of death certificate by

JULY 1, 2025

Email: sfa-help@mail.ufl.edu