

**APPLICATION FOR ANDREW J. FLANAGAN MEMORIAL FUND**  
**ASSOCIATION SCHOLARSHIP**

**2018-2019 Academic Year College Level Program**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Complete

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Fire Dept: \_\_\_\_\_

Years in Fire Service: Career \_\_\_\_\_ Volunteer \_\_\_\_\_ Junior/Cadet \_\_\_\_\_ Total Years \_\_\_\_\_

(Print) I, \_\_\_\_\_ **Chief** of the \_\_\_\_\_ (Career)(Volunteer) Fire Department attest that the above named individual has been an active member of this dept. for at least 2 years, including a Junior/Cadet/Explorer program.

Signed: \_\_\_\_\_, Chief

On a separate piece of paper, **list your educational background**, beginning with High School and including any resident National Fire Academy courses, CT Fire Academy courses, or other courses taken. **Please include dates and provider of courses.**

Please provide an **Official College Transcript** showing course or courses that you have taken and the grade(s) received, **including the current academic year.**

Please attach a statement of approximately 250 words indicating: 1) Your educational goals; 2) Instructional program or courses in which you plan to enroll; 3) Why you believe this educational program will be useful to you; 4) Why you are applying for financial assistance.

Please provide 2 references with name, address and phone number.

1: \_\_\_\_\_

2: \_\_\_\_\_

Are you eligible to receive educational funding from another source, including financial aid? Yes \_\_\_\_ No \_\_\_\_

I attest that the information provided with this application is correct and true to the best of my knowledge.

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

Please return your signed application and any supporting documentation, to be received by **January 31, 2019** to:

Peter E. Beckwith, Secretary  
Flanagan Scholarship Fund  
125 South Farms Drive  
Manchester, CT 06040  
860-646-4242

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Committee Assessment: Recommended \_\_\_\_ Not Recommended \_\_\_\_ Reason: \_\_\_\_\_

Committee Chairman's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Award: 1<sup>st</sup> Semester \_\_\_\_\_ 2<sup>nd</sup> Semester \_\_\_\_\_

## **ELIGIBILITY REQUIREMENTS FOR FLANAGAN MEMORIAL FUND AWARDS**

- 1 - Applications are considered for full time or part time enrolled students making satisfactory academic progress in **college level Fire Science, Fire Technology or Fire Administration type majors** in the current academic year.
- 2 - Applicant must have been an active member of a fire department within Connecticut for the 24 months preceding the closing date for receipt of applications. This includes time as a Junior/Cadet/Explorer.
- 3 - Applicant must be a resident of the state of Connecticut.
- 4 - Applicants shall submit a list of any college level courses that they have taken, including the name and location of the institution attended, the dates attended, and the grades received. All courses submitted shall be from a nationally accredited college or university.
- 5 - Applications for awards for the **first semester of the 2018-2019** academic year are **due not later than January 31, 2019**. These awards will be given in February 2019.
- 6 - In order to receive this award, the applicant **must furnish** the committee with appropriate documentation, including **an Official College Transcript for the first semester of this academic year**.
- 7 - Having completed at least one course in the first semester of this academic year, an award recipient may be granted a second award upon successful completion of an additional course or courses during the second half of the academic year. **In order to receive this second award, the student must again furnish the Committee with an Official Transcript for the 2<sup>nd</sup> semester to be received by June 30, 2019.**  
The second award will be given in July.  
*(No notification will be given to the award recipient for submitting this 2<sup>nd</sup> semester information.)*
- 8 - First consideration for a scholarship is given to those individuals pursuing a Bachelor or Associate degree, either full or part time. The number of scholarships awarded is determined in part by the amount of funds available in the Scholarship Fund.

## **CONNECTICUT FIRE DEPARTMENT INSTRUCTORS ASSOCIATION AWARD**

The Connecticut Fire Department Instructors Association will also make a similar award. To be eligible for the CFDIA award, the applicant must be:

- A. A child of a deceased firefighter with preference being given to a child of a firefighter killed in the line of duty, and meeting the requirements of 1 and 3-7 above.

**OR**

- B. A firefighter meeting the requirements of 1 through 7 above, with preference being given to firefighters who are a regular member of the CFDIA or have an interest in instructing firefighters.

Please check all applicable items below:

I am a:

Child of a firefighter killed in the line of duty \_\_\_\_\_

Child of a deceased firefighter \_\_\_\_\_

Regular Member of the CFDIA \_\_\_\_\_

Certified State Fire Instructor \_\_\_\_\_

