William C. Bean, Jr. Memorial Foundation

P.O. Box 772, Colfax, Ca. 95713

SCHOLARSHIP APPLICATION FORM Bear River High School

History of the Scholarship:

William (Bill) Chandler Bean Jr. was born in Sacramento, California, on April 8, 1970. When Bill was five years old he moved to Nevada City, California. In 1979 Bill moved to Colfax, California.

Bill attended Colfax Elementary School and Colfax High School. Bill was a 4.0 student throughout his school career. While attending Colfax High School, Bill lettered in Baseball, Basketball and Football. Bill was a class representative for 4 years, a member of the Alpha Omega Society, Senior Class President, and the Salutatorian at his graduation in 1989.

After graduating from Colfax High School, Bill attended the West Point Military Academy. He was given a medical discharge, suffering from asthma. This did not slow him down. Bill continued his education at the University of California at Davis, and the Butte Police Academy, in Chico. Upon graduating from the Butte Police Academy, Bill joined the Placer County Sheriff Department. After 5 years, Bill transferred to the Sacramento Police Department.

Bill continued his education in 1998. Even though Bill was working full time, as a Sacramento City Police Officer, he became a full time student at Sierra Community College. There he maintained a 4.0 GPA, was on the Presidents Honor Roll, earned his AA degree, and played on the football team, where he earned All League Honors.

Bill was killed "in the line of duty" on February 9, 1999, while attempting to apprehend a wanted felon, in Del Paso Heights, California.

This \$1,000 Scholarship is given, in Bills' honor, to a senior who exemplifies the characteristics and ideals of scholarship, athletic achievement, leadership, service to the community, and caring for others.

TO SCHOLARSHIP APPLICANT AND PARENTS: This is a voluntary and confidential scholarship application form to be used by the WCBJMF Scholarship Committee. In order to get the best possible picture of the applicants, and to make equitable choices for scholarship winners, the following information requested should be carefully completed.

<u>APPLICANT MUST TYPE OR PRINT ENTIRE APPLICATION</u>

Instructions For The Applicant:

- 1. Attach a transcript to the scholarship application. Please request transcript two weeks prior to deadline.
- 2. Fill out application in black ink.
- 3. Page 6 (Confidential Report) give this page to the person of your choice. Ask them to submit directly to Kimala DeSena at the District Office.
- 4. <u>DEADLINE DATE:</u> May 1, 2019 by 3:00PM
 Turn into Kimala DeSena, Scholarship Coordinator mailbox at BRHS

NAME:			PHONE:				
	Last	First					
ADDRESS	:	at O Niversia au	of Residence	C:t-	7:		
	Stre	eet & Number	of Residence	City	Zip		
Father (or 0							
Name:Occupation:							
Mother (or			_				
Name:			Occup	ation:			
Institution o	of Higher Le	arning You Pl	an To Attend:				
2 nd Choice:	·		Major/Field of	f Study:			
Career Goa	al:						

STUDENT NAME:	
Write in the space below a personal statement addressing such topic **Attributes and experiences that may be evident through a review of you **Attributes and experiences that may not be evident through your record. **What is important to you? What are your specific goals, personal and ca **How do your accomplishments reflect your values and goals? **Describe any unusual circumstances or challenges you may have. **Why do you qualify for the William Bean Jr. Memorial Scholarship?	academic record. areer?
Please type or print clearly (No Attachments, PLEASE)	
STUDENT CERTIFICATION: I hereby declare that I have read all the statements	on this application and
that to the best of my knowledge and belief, they are correct.	on the approach and
Signature of Applicant	Date

GIVE A BRIEF OUTLINE OF YOUR EXPECTED POST SECONDARY PLANS OVER THE NEXT FOUR YEARS OR MORE: (Use the back of this page if necessary)
I have read and understand the regulations of this application form. I also understand that the Committee has sole discretion in awarding these scholarships and that its decision is final and cannot be challenged or changed.
Signature of Applicant

List your School/Community Activities - (freshmen through senior year)

SCHOOL ACTIVIITES	9 10 11	12	COMMUNITY ACTIVITIES 9 10 11 12					
Student Government			<u>Organizations</u>					
<u>Organizations</u>			Employment (State Duration)					
<u>Athletics</u>			Awards, Honors, Achievement					
Pep Squad, Music, Band								

Stud	ent Name:					
CONF	IDENTIAL REPORT	ON APPLICA	NT:			
This po this to confide	ortion must be complete Debbie Zeisler in the ential.	ed by a faculty m district office. A	ember. <u>When</u> Il information y	ocompleted, fa ou give will be o	nculty member degreatly appreciated	elivers and kept
1.	How long was the a	applicant a stud	ent in your cla	ass?		
2.	On what do you base Personal Acquainta					_
3.	Has the applicant n interest his/her studled you to believe the	dies? If n	io, has recent	improvement	in attitude toward	ls study
4.	Was the applicant of Did applicant permi					
5.	To what degree do Highly					
Please	e indicate your perso	nal rating of the Excellent	• •	Fair	Poor	
Acade Perso Leade Schoo	nality				——————————————————————————————————————	
Please	e include your persor	nal assessment	on the applic	ant*		
 'May u	se letter of recommend	dation				

Signature

Title

Date