

- 2) Letter(s) from employer(s) stating the officer has been employed full-time for at least 15 years or separated for no more than 10 years from full-time employment in the State of Alabama.

Name of College or University _____

I hereby certify that I have been accepted for enrollment, or am enrolled, as a student in good academic standing at the institution noted above. I also acknowledge that the statements and attachments included with this Application and Certification of Eligibility for the Alabama Law Enforcement Officers' Family Scholarship Program benefits are true and correct.

Date

Signature of Applicant

THE APPLICANT IS HEREBY CERTIFIED as qualified under the provisions of the Alabama Law Enforcement Officers' Family Scholarship Program and eligible for educational assistance for undergraduate study at the postsecondary educational institution listed above.

Date

Alabama Commission on Higher Education

USE OF SOCIAL SECURITY NUMBER

Section 7(a) of the Privacy Act of 1974 (5 U.S.C. 522A) requires that when any Federal, State, or local government agency requests an individual to disclose his/her Social Security account number, that individual must also be advised whether that disclosure is mandatory or voluntary, by what statutory or other authority the number is solicited, and what uses will be made of it.

Accordingly, applicants are advised that disclosure of their Social Security Account Number (SSAN) is required as a condition for participation in the Police Officer's and Firefighter's Survivors Educational Assistance Program in view of the practical administrative difficulties which the Program would encounter in maintaining adequate program records without the continued use of the SSAN.

The SSAN will be used to verify the identity of the applicant and as an account number (identifier) throughout the life of the scholarship in order to record necessary data accurately. As an identifier, the SSAN is used in such Program activities as determining Program eligibility, certifying school attendance, making and verifying scholarship payments, and maintaining records of scholarship payments. Authority for requiring the disclosure of an applicant's SSAN is in Section 7(a)(2) of the Privacy Act, which provides that an agency may require disclosure of an individual SSAN as a condition for the granting of a right, benefit, or privilege provided by law.

This form must be completed and returned to:

**Alabama Commission on Higher Education
Grants and Scholarships Department
P.O. Box 302000
100 North Union Street
Montgomery AL 36130-2000**