

# ALABAMA ASSOCIATION OF VOLUNTEER FIRE DEPARTMENTS

## SCHOLARSHIP PROGRAM and APPLICATION

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### REQUIREMENTS

We offer a limited number of scholarships each year. Scholarships are given on a one-year basis. Previous applicants and/or recipients must submit a new application each year to be considered. Applications for the AAVFD Scholarship must be postmarked NO later than March 31<sup>st</sup>. Applications with all required documentation may be submitted via email to: Jessica Holliday @ [Jessica.holliday.aavfd@outlook.com](mailto:Jessica.holliday.aavfd@outlook.com).

1. A volunteer firefighter, or a dependent son, or a dependent daughter, or the spouse of a volunteer firefighter (as listed on the 1040 tax return), in the State of Alabama; who is a current, active member of a Certified Volunteer Fire Department for a minimum of three (3) consecutive years; and said department has been a member of the AAVFD for the last three (3) consecutive years.
2. A dependent of a volunteer firefighter as listed on the 1040 tax return, and the volunteer firefighter meets the requirements as specified above in number 1.
3. The surviving spouse, son, or daughter of a fallen volunteer firefighter in the State of Alabama, whose death occurred in the Line of Duty; said volunteer firefighter must have been a current, active member of a Certified Volunteer Fire Department with said department being a member of the AAVFD for the last three (3) consecutive years at the time of the firefighters' death.
4. A surviving dependent as listed on the 1040 tax return of a fallen firefighter, whose death occurred in the Line of Duty, and the fallen volunteer firefighter met the requirements as stated above in number 3.
5. Applicants must be a graduating high school senior in 2026 or have a GED.
6. Applicants must have maintained a 'C' average at the last school attended.
7. The AAVFD Scholarship is awarded to undergraduates at a regionally accredited public or private two (2) or four (4) year institution.
8. Scholarships awarded must be used within one (1) year.
9. Applicants must submit a copy of the volunteer firefighters' last year's 1040 tax return.
10. Applicants must submit a transcript of grades for the last school year attended.
11. Applicants must submit a copy of their high school diploma or a copy of their GED.
12. Applicants must submit a completed AAVFD Scholarship Application.
13. Applicants must submit three (3) letters of recommendation. One of those recommendation letters must be from your school counselor or principal.
14. Applicants must submit a short essay as to why HE/SHE desires to be awarded an AAVFD Scholarship and what their plans are for the future.
15. If the applicant is applying as a survivor of a firefighter fallen in the line of duty, a copy of the death certificate should be submitted.

**ALABAMA ASSOCIATION OF VOLUNTEER FIRE DEPARTMENTS**  
**SCHOLARSHIP APPLICATION**

**\*\*\*\*\*MUST BE POSTMARKED NO LATER THAN MARCH 31<sup>st</sup>\*\*\*\*\***

**Applicant's Information: (Please type or print)**

Full Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street, Route, Post Office Box, etc.   
\_\_\_\_\_  
City State Zip

Telephone: \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

When will/did you graduate from high school? \_\_\_\_\_

Name of High School or School Last Attended: \_\_\_\_\_

High School Address: \_\_\_\_\_

Name of the college you will be attending: \_\_\_\_\_ est. 1977

Address: \_\_\_\_\_

Planned Major: \_\_\_\_\_

List ALL Scholarships or Grants for which you have applied.  
\_\_\_\_\_  
\_\_\_\_\_

List ALL Scholarships or Grants for which you have been awarded.  
\_\_\_\_\_  
\_\_\_\_\_

Have you applied for the Alabama Association of Volunteer Fire Departments scholarship before? \_\_\_\_\_

If yes, please give date(s) \_\_\_\_\_

Have you been awarded this scholarship before? \_\_\_\_\_

If yes, please give date(s) \_\_\_\_\_

**ALABAMA ASSOCIATION OF VOLUNTEER FIRE DEPARTMENTS**  
**SCHOLARSHIP APPLICATION**

**Volunteer Firefighter's Information: (Please type or print)**

Applicant's Full Name: \_\_\_\_\_

Applicant's relationship to the volunteer firefighter:

Self \_\_\_\_\_ Spouse \_\_\_\_\_ Son \_\_\_\_\_ Daughter \_\_\_\_\_ Dependent \_\_\_\_\_

Firefighter's Name: \_\_\_\_\_

Firefighter's Address: \_\_\_\_\_

Name of Volunteer Fire Department: \_\_\_\_\_

Volunteer Fire Departments Address: \_\_\_\_\_

Volunteer Fire Departments Telephone: \_\_\_\_\_

**\*\*\*\*\*PLEASE HAVE THE CHIEF COMPLETE THE FOLLOWING\*\*\*\*\***

Is this Volunteer Fire Department a current member of the Alabama Association of Volunteer Fire Departments? \_\_\_\_\_

Give dates of service: From \_\_\_\_\_ to \_\_\_\_\_

What position(s) does/did the above-named firefighter hold in this department?  
\_\_\_\_\_

Briefly describe the above-named firefighter's service to this department:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

As Chief of this department, please verify the above information to be accurate and true by signing below.

Date: \_\_\_\_\_ Chief's Signature: \_\_\_\_\_

Chief's Telephone Number: \_\_\_\_\_

**ALABAMA ASSOCIATION OF VOLUNTEER FIRE DEPARTMENTS**  
**SCHOLARSHIP APPLICATION**

**Fallen Firefighter, Death in the Line of Duty: (Please type or print)**

Applicant's Full Name: \_\_\_\_\_

Applicant's relationship to the fallen firefighter:  
Self \_\_\_\_\_ Spouse \_\_\_\_\_ Son \_\_\_\_\_ Daughter \_\_\_\_\_ Dependent \_\_\_\_\_

Fallen Firefighter's Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Name of Volunteer Fire Department: \_\_\_\_\_

Volunteer Fire Departments Address: \_\_\_\_\_

Volunteer Fire Departments Telephone: \_\_\_\_\_

Chief's Name (at time of firefighter's death): \_\_\_\_\_

Was the Volunteer Fire Department a member of the Alabama Association of Volunteer Fire Departments for the last three (3) consecutive years at the time of the firefighter's death?

\_\_\_\_\_

How long was the firefighter a member of this department? \_\_\_\_\_

Give Dates of Service: From \_\_\_\_\_ To \_\_\_\_\_

What position(s) did the firefighter hold in this department?

\_\_\_\_\_

Briefly describe the firefighter's service to this department: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of firefighter's death: \_\_\_\_\_

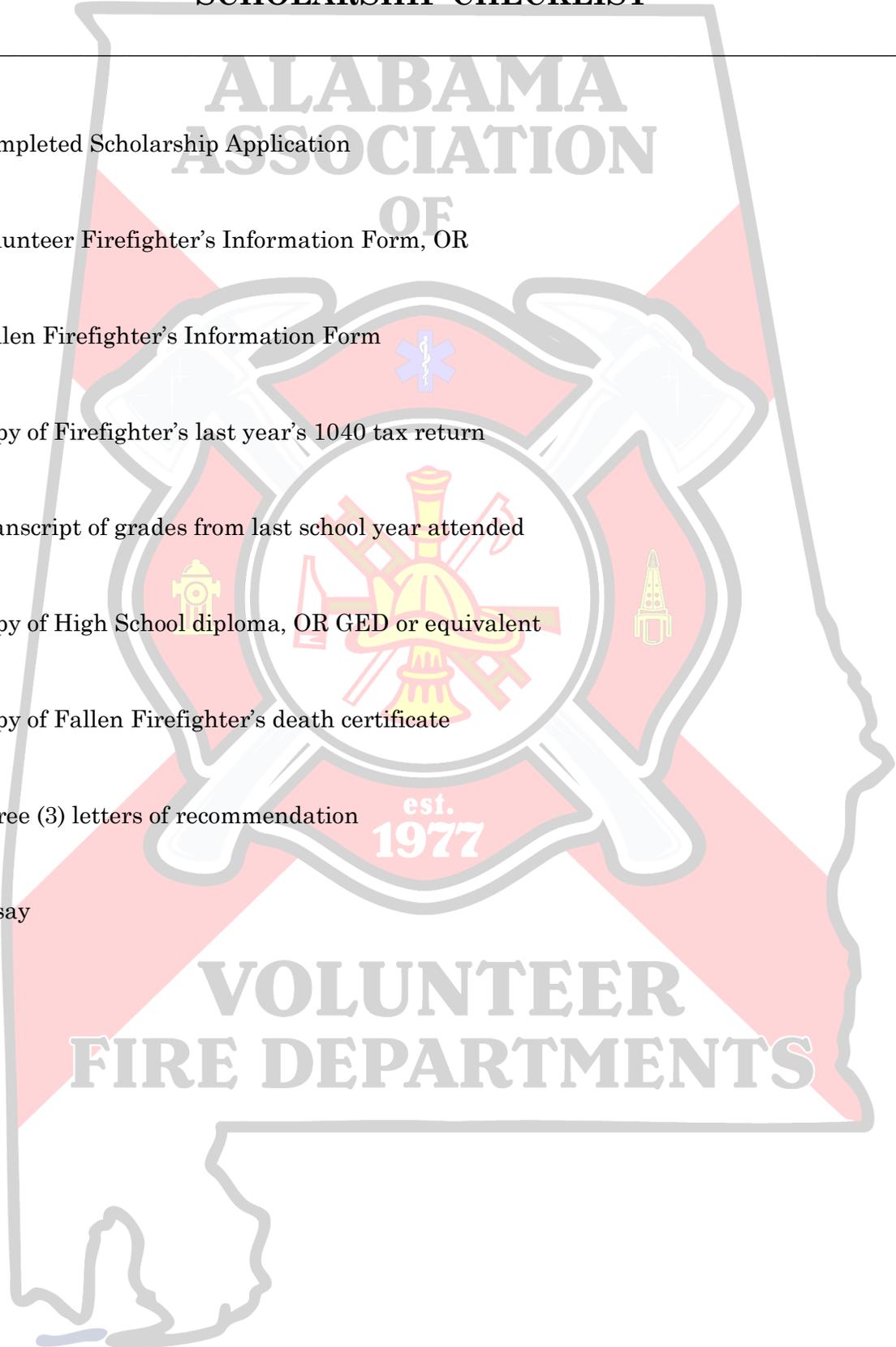
Briefly give cause of firefighters' death: \_\_\_\_\_

\_\_\_\_\_

# ALABAMA ASSOCIATION OF VOLUNTEER FIRE DEPARTMENTS

## SCHOLARSHIP CHECKLIST

- 
- \_\_\_\_\_ Completed Scholarship Application
  - \_\_\_\_\_ Volunteer Firefighter's Information Form, OR
  - \_\_\_\_\_ Fallen Firefighter's Information Form
  - \_\_\_\_\_ Copy of Firefighter's last year's 1040 tax return
  - \_\_\_\_\_ Transcript of grades from last school year attended
  - \_\_\_\_\_ Copy of High School diploma, OR GED or equivalent
  - \_\_\_\_\_ Copy of Fallen Firefighter's death certificate
  - \_\_\_\_\_ Three (3) letters of recommendation
  - \_\_\_\_\_ Essay



**ALABAMA ASSOCIATION OF VOLUNTEER FIRE DEPARTMENTS**

est. 1977