



Judy Brackin RPL Scholarship Application Form

Applicant Name: _____

APCO Membership #: _____

Years of APCO Member: _____ Years as PA Chapter Member #: _____

Applicant Agency: _____

Agency Address: _____

Agency Contact: _____

Agency Contact Email: _____ Agency Contact Phone #: _____

Attach the following documents:

1. A formal and prestigious letter serving as an acknowledgment of excellence within our industry.
2. Brief description on your RPL service project plan and how it will benefit our chapter and/or your agency.
3. List of two (2) professional references

By signing this for I agree if accepted for the Judy Brackin RPL Scholarship, I will complete the RPL program in its entirety. If I do not complete the RPL Program I will make arrangements to reimburse the PA APCO Chapter, the full tuition amount.

Printed Name: _____ Title: _____

Signature: _____ Date: _____

Email completed application to: Daryl_R.George@lvhn.org