

THE ON GUARD INITIATIVE INC.
Corrections Professional Educational Assistance Application

On Guard has established this Educational Assistance Program to provide financial help to any Corrections Professional, currently employed or retired, who wishes to further his or her education. Educational programs may range from working toward a degree to programs that provide personal fulfillment such as a hobby. Award will vary based on the cost of the program you have chosen.

Corrections Professional's name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

Current work status: Employed Facility: _____ Rank: _____ Years of Service: _____

Intended date of retirement, if known: _____

Retired Facility: _____ Rank: _____ Years of Service: _____

Educational facility currently attending or planning to attend:

Name of course currently studying or planning to study, (Attach documentation):

Briefly describe why this course would benefit you personally and/or professionally, (use reverse side if needed):

Applicant's Signature:

Please return this application and any applicable attachments to: The On Guard Initiative, P. O. Box 654, Linwood, MA 01525.