

TENNESSEE CHAPTER  
INTERNATIONAL ASSOCIATION OF ARSON INVESTIGATORS, INC.

BYRGE-HENSON MEMORIAL SCHOLARSHIP

Dear Applicant:

Thank you for your interest in the Tennessee Chapter, International Association of Arson Investigators Annual Seminar. The Byrge-Henson Memorial Scholarship is open to any non-compensated active volunteer fireman within the State of Tennessee. The purpose of this scholarship is to provide a volunteer fireman who might not otherwise be able to attend the Chapter's annual training a means by which he/she can attend. The funding for this scholarship comes from members of the Tennessee Chapter to be used in the manner stated in the Tennessee Chapter's Constitution and By-Laws.

To be eligible for the scholarship the applicant must complete the scholarship application in full and return it to the Tennessee Chapter no later than June 1<sup>st</sup>. of the current year. Accompanying the application there must be a letter from the applicant's Fire Department's Chief, Public Safety Director, or equivalent confirming the active and non-compensated status of the applicant. Within this letter there must also be a statement of commitment by the author that is understood that the applicant will use this training to assist those officials involved in the investigation of fires and explosions within the applicant's jurisdiction.

All applications received complete and by the due date shall be reviewed by the scholarship selection committee and the awardee shall be notified on or about July 1<sup>st</sup>. of the current year of his/her approval. The choice(s) of the committee shall be final.

The scholarship shall cover the cost of lodging for the entire seminar, usually Sunday through Thursday nights. The cost of all registration fees and class material will be covered as will any expense deemed necessary by the Tennessee Chapter's Board of Directors. The awardee will also receive per diem for food to be paid in an amount equal to the current State of Tennessee expense reimbursement rate for the location at which the Seminar is held. The awardee shall be responsible for all travel expenses and all expenses not outlined herein.

BYRGE-HENSON MEMORIAL SCHOLARSHIP  
APPLICATION

1. Applicant's Name: \_\_\_\_\_

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

City, State & Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

2. Fire Department: \_\_\_\_\_

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

City, State & Zip Code: \_\_\_\_\_

3. Chief or Director: \_\_\_\_\_

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

City, State & Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

4. Applicant's Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

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

City, State & Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

5. Fire department affiliation (indicate below the one that best describes your department)

- a. full time, all personnel compensated: \_\_\_\_
- b. full time, some personnel compensated: \_\_\_\_
- c. full time, no personnel compensated: \_\_\_\_
- d. part time, all personnel compensated: \_\_\_\_
- e. part time, some personnel compensated: \_\_\_\_
- f. part time, no personnel compensated: \_\_\_\_

6. Applicant's Experience:

On a separate sheet(s) enclose a list of all Fire Departments that you have been a member of. List the name, full address, and total time that you were a member.

7. Applicant's Education:

On a separate sheet(s) list all Fire Prevention, Fire Suppression and/or Fire Investigation training you have received. List the course name, instructor or sponsor, location of attendance and the number of hours you completed. If you have not received any formal training in this area you must state so on a separate sheet and enclose.

8. Completion:

I certify that I am a current, active member of the Fire Department listed above and that I am not compensated in any manner for the activities in which the Fire Department is involved. I understand that any false statement made on this application shall be grounds for my disqualification in the Byrge-Henson Memorial Scholarship.

Name: \_\_\_\_\_  
(Print)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Be sure to enclose the following with this application or it will not be considered and will be returned.

- 1. Application
- 2. Letter from Chief, Public Safety Director, or equivalent
- 3. List of all Fire Departments affiliations
- 4. List of all Fire related training

Please return all completed applications to Mr. Bo Kaylor 227 South Pine Street Dayton, Tennessee 37321.