

# Tennessee Chapter International Association of Arson Investigators

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## BYRGE-HENSON-KAYLOR MEMORIAL SCHOLARSHIP APPLICATION

Dear Applicant:

The Byrge-Henson Memorial Scholarship is open to any non-compensated active volunteer firefighter within the State of Tennessee. The purpose of this scholarship is to provide a volunteer firefighter 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 as 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 1st** of the current year. Accompanying the application must be a letter from the 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 completed and by the due date shall be reviewed by the scholarship selection committee and the awardee shall be notified on or about July 1st 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 a 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.



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**Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** TN **Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Fire Department:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** TN **Zip Code:** \_\_\_\_\_

**Chief/Director Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** TN **Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Applicant's Occupation:** \_\_\_\_\_

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

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

**City:** \_\_\_\_\_ **State:** TN **Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Immediate Supervisor Name:** \_\_\_\_\_



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**Fire Department Affiliation** (indicate below the one that best describes your department)

- Full-time, all personnel compensated: \_\_\_\_\_
- Full-time, some personnel compensated: \_\_\_\_\_
- Full-time, no personnel compensated: \_\_\_\_\_
- Part-time, all personnel compensated: \_\_\_\_\_
- Part-time, some personnel compensated: \_\_\_\_\_
- Part-time, no personnel compensated: \_\_\_\_\_

**Applicant's Education:**

On a separate sheet(s) of paper list all Fire Prevention, Fire Suppression and/or Fire Investigation training you have received. (copies of certificates are not required).

**Applicant's Experience:**

On a separate sheet(s) of paper list all the fire department(s) that you are currently a member of and any fire departments that you were a member of.

**Affirmation:**

I certify that I'm a current and active member of the fire department(s) listed above. I understand that any false statement or information made on this application shall be grounds for my disqualification in the Kenneth R. Ogle memorial Scholarship Program.

On a separate sheet of paper please explain how the training received would benefit you and your department.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Print

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

Received by a member of the scholarship committee on:

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

Signed: \_\_\_\_\_  
Committee Member

