

The Bryant Searcy Scholarship Foundation



The Bryant Searcy Scholarship Foundation is a nonprofit organization founded in January 2022, in honor of fallen Wayne County Deputy Corporal, Bryant Searcy. Bryant loved many and was loved by many. Corporal Searcy lived, and modeled a truly honorable life, he was murdered in the line of duty on September 2, 2020. He had so much more to give. His mission in life was to be a positive influence with everyone he met. Sadly, he will never have the opportunity to fulfill his lifelong passions. However, through the Bryant Searcy Scholarship Foundation his legacy will live on.

Award Amount: \$2,500.00
One Time Award Per Recipient

To apply for and receive this scholarship you must:

1. Be a current resident of the Detroit Metropolitan area (which includes the following counties: Lapeer, Livingston, Macomb, Oakland, St. Clair, and Wayne)
 - Be a current graduating high school senior
2. Submit proof of acceptance to a full-time program at a 4-year accredited college or university for the 2025-2026 academic year.
3. Submit the application **by May 23, 2025** electronically signed by you and your parent/guardian
4. Minimum 3.0 overall cumulative GPA required. An official transcript must be submitted to tbssfgb@gmail.com by a school official
5. Include a two-page, double spaced essay, size 12 Times New Roman font, one-inch margins on the topic: Given the socio-economic state of our nation, many people are disadvantaged in our society. If chosen to receive the scholarship, how would you use the money and your higher education to shift the socioeconomic dynamics in your community and support the disadvantaged?
6. Provide 2 letters of recommendation
 - ✓ (1) School recommendation
 - ✓ (1) Community or Church recommendation (if applicable)
7. The Application Package along with the Essay must be returned via the website by the deadline date of May 23, 2025
8. A virtual interview is required as part of the application process.

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Directions: Complete all information requested below.

I. Applicant Information

First Name		Middle Name		Last Name	
Street Address					
City			State	Zip	
Home Phone	Cell Phone		E-mail Address		
Date of Birth (Month/Day/Year)					
High School					
Name of School Currently Attending:			Counselor's Name		Overall GPA
Address		City	State		Zip
Anticipated College/University and Major					
College/University			Location (City and State)		
Intended Major/Field of Study			Intended Minor/Field of Study (not required)		

II. Family Information

Name of Mother/Guardian				
Mother/Guardian's Address (if different from applicant's)		City	State	Zip
Mother's Phone Number				
Name of Father/Guardian				
Father/Guardian's Address (if different from applicant's)		City	State	Zip
Father's Phone Number				
Number of Family Members in the Household		Number of Family Members currently in college		

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List any family members in your household currently in a post high school program (ex: college/university, community college, vocational/trade school)	List name of the educational institution
1.	
2.	
3.	
4.	

III. Extra-Curricular/Community Service/Volunteer Experience/Activities (e.g., school, religious, social groups)

Name of Group/Activity/Service	Grade (Check boxes that apply.)				Leadership Position(s) Held, please list
	9	10	11	12	
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IV. Work Experience

Employer/Organization	Date of Employment/Service	Position Held
1.		
2.		
3.		
4.		

V. Honors and Awards (e.g., academic, athletic, community)

Award	Source of Award	Reason(s) for Award
1.		
2.		
3.		
4.		
5.		

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VI. Financial Awards

Scholarships, Grants, or Awards that You Have Received	Awarding Organization	Amount Awarded
1.		
2.		
3.		
4.		
5.		

VII. Additional Information (OPTIONAL)

If you have any additional information, you feel will assist in evaluating your need and eligibility, please state below. Please attach a separate document with this information.

I hereby certify the information provided in this application is accurate and current. My signature also confirms that I am a resident of Detroit Metro area. I understand this application packet will be kept confidential. All materials submitted become the final property of The Bryant Searcy Scholarship Foundation and will not be returned.

Signature of Applicant

Date

Signature of Applicant's Parent or Guardian

Date

The Bryant Searcy Scholarship Foundation



Media Release and Photography Form

I _____ (Parent's name) understand that my child may be photographed in connection with his/her application for the scholarship award. I give permission for The Bryant Searcy Scholarship Foundation; also known as TBSSF; to publish on the Internet his/her name, in media still photographs ("pictures") or video that may be taken of my child without payment or any consideration and without notification. I understand and agree that these images will become the property of The Bryant Searcy Scholarship Foundation which shall have complete ownership of the Images. I hereby irrevocably authorize The Bryant Searcy Scholarship Foundation to publish or distribute these Images for the purpose of publicizing The Bryant Searcy Scholarship Foundation program or for any other lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my child's likeness appears. Additionally, I waive any rights to royalties or other compensation arising out of or related to the use of the Images.

I hereby hold harmless, release, and forever discharge The Bryant Searcy Scholarship Foundation and any of its owners; employees, representatives, agents, and assignees from any and all claims, costs, suits, actions, judgments, and expenses which my child, his/her heirs, representatives, executors, administrators, or any other persons acting on his/her behalf have or may have by reason of the use of the Images.

This release specifically includes, without limitation, a complete release and discharge of any liability by virtue of any editing, distortion, alteration, or optical illusion, whether intentional or otherwise, that may occur or be produced in the taking of or editing of said Images, unless it can be shown that such was maliciously caused, produced, and published solely for the purpose of subjecting my child to conspicuous ridicule, scandal, reproach, scorn, and indignity.

Signature of parent or legal guardian
(If under 18 years of age)

Date

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Scholarship Application Checklist

Use the checklist below to ensure you have completed and submitted all required materials to receive consideration for the scholarship award.

Your application packet **must** be received by the deadline date of **May 23, 2025**.

All applications that are **incomplete** (missing items) and/or **handwritten** and/or **late** will **not** be considered.

- ☐ A computer typed and completed application. **Handwritten applications will not be reviewed.**
- ☐ Electronic applicant signature, at the end of the application.
- ☐ Applicant's parent(s) or guardian(s) electronic signature, at the end of the application.
- ☐ Media release and photography form electronically signed by a parent or guardian.
- ☐ **An official, signed high school transcript must be emailed by school official to _____ (Student must request transcript).**
- ☐ Attach a two-page, double-spaced essay, size 12 Times New Roman font, one-inch margins on the topic: Given the socio-economic state of our nation, many people are disadvantaged in our society. If chosen to receive the scholarship, how would you use the money and your higher education to shift the socioeconomic dynamics in your community and support the disadvantaged?
- ☐ Recommendation letter from school staff member.
- ☐ Recommendation letter from a community or church leader.
- ☐ Submit application and pertinent documents via email to: _____
- ☐ Additional Information (OPTIONAL)

NO APPLICATIONS WILL BE ACCEPTED AFTER THE **MAY 23, 2025** DEADLINE