AHAIN Scholarship Fund - Ralph E. Biggs Scholarship 2020 Application

Thank you for your interest in the AHAIN Scholarship Fund. The Affordable Housing Association of Indiana established this scholarship fund to promote education and expand opportunities for individuals involved in affordable housing in Indiana. The AHAIN scholarship is managed through the Adams County Community Foundation (ACCF).

Eligible parties include:

• AHAIN Member Residents and Employees

In 2020, the AHAIN Scholarship Fund will award the Ralph E. Biggs Scholarship in the amount of up to \$1,500 per year (award will be split between two semesters) for educational expenses with potential for renewal for up to four years.

Applicants Must:

- Be a candidate for high school graduation, or have earned a high school diploma or equivalent;
- Be accepted at or enrolled as a full-time or part-time under graduate student at an accredited 2- or 4-year college, university or as a full-time or part-time student at an accredited vocational educational school;
- Currently work for an AHAIN Member Company OR reside in an AHAIN Member property;
- Be a United States citizen or permanent legal resident;
- Demonstrate scholastic achievement; and
- Demonstrate financial need.

Scholarship Recipient Expectations:

The AHAIN Scholarship Fund will provide recipient with up to \$1,500 per year to assist in paying for expenses related to enrollment at the accredited school. Pursuant to the requirements of the Internal Revenue Code \$117(b), the funds received from the Scholarship Program must be used to:

- Pay tuition and fees required for enrollment at an educational institution; or
- Pay for fees, books, supplies, and equipment required for courses of instruction at such educational institution.

In addition, recipient is required to agree:

- Potential Opt-Out or other grants have paid tuition and fees: Understand that any funds not expended or committed for the purposes of the scholarship set forth above will be returned to the Fund;
- Semester Invoice: To provide a copy of proof of tuition payment at a college, university, or vocational educational school for the term for which the scholarship is awarded;
- ACCF Communication: For fall semester and spring semester payments, student must submit evidence of continuing eligibility, including evidence of tuition billing/payment at the accredited college, university, or vocational educational school.
- Continued-Eligibility: To submit evidence of continued occupancy in an AHAIN Member property OR continued employment at an AHAIN Member Company.
- Transcripts: To provide a grade report showing that a minimum Grade Point Average (GPA) of 2.0 each semester was maintained, while taking at least 3 credits. If in any semester recipient does not maintain this standard, then the AHAIN Scholarship Fund may terminate the scholarship or may, in its sole discretion, place the recipient on probation for one semester. In such case, failure to achieve this standard in the next applicable semester will result in termination of the scholarship.

Application Requirements:

Applicants must complete all applicable fields of the application to be considered for the scholarship. Applications must be received by the AHAIN Scholarship Fund / Adams County Community Foundation (ACCF) on or before the deadline of the first Wed., in February by 4:00 pm (eastern standard time).



- 1. Complete all applicable fields of the application.
- 2. Clearly label all application attachments with applicant name and information, and submit electronically with the application.
- 3. Send all supporting documents, including academic transcripts and signed letter of recommendation, to the ACCF@AdamsCountyFoundation.org.
- 4. Electronic submission of application is preferred. Please submit all application materials via email to ACCF@AdamsCountyFoundation.org.
- 5. Mail or email application, transcripts, and letter of recommendation to ACCF@AdamsCountyFoundation.org.

SUBMISSION ADDRESS

Email:	ACCF@AdamsCountyFoundation.org
Mailing Address:	Adams County Community Foundation 102 N. 2 nd Street Decatur, IN 46733
Questions?: Office hours:	T: 260.724.3939 / E: <u>accf@AdamsCountyFoundation.org</u> Monday-Thursday: 8-4 and Friday: 8-1
Access this application	on: <u>www.AdamsCountyFoundation.org</u> scholarship / applications / AHAIN Scholarship Application
2 Due Dates / time:	the first Wed. in February 4:00 pm (eastern standard time).

Note: All decisions concerning selection of scholarship recipients are made by a Scholarship Selection Committee with the help of staff members, who are solely responsible for the final selections and the awards of scholarships to individuals so selected. The AHAIN Scholarship Fund prohibits the awarding of any scholarship to a relative of any member of the Selection Committee, and prohibits giving consideration of any such award. "Relatives" include ancestors, spouses, siblings, children and the spouses, siblings and children of such individuals. Adopted children and stepchildren are included in this definition.

Please ensure that you either email or mail all appropriate documentation to the Scholarship Fund in order for it to be received by the application deadline date, February 5, 2020.

PERSONAL	INFORMATION
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E-mail:	Date of Birth:	
Home Phone:	Cell Phone:	
City	State	Zip Code
Street Address		Apartment or Unit Number
Last Address:	First	Middle

Name of AHAIN Member Company/Property: _____

Length of time at AHAIN Member Company/Property: _____

Property Manager's Name and Phone Number: _____

PERSONAL STATEMENT

Computer generate, max, two-page narrative/essay using the following topic:

"Describe your own unique, personal life experiences that have led you to believe that affordable housing should be a vital component of communities throughout the country."

MOST RECENT SCHOOL & TEST INFORMATION

High School or College:			
	Name	City	State
Graduation Date:			
Type of Diploma/Degree:		*High school GPA:	
*College GPA:		**ACT and/or SAT:	

*Send your school transcripts (unofficial is accepted) to the ACCF@AdamsCountyFoundation.org. Write your most recent accumulated GPA scores in the space above.

COLLEGE GOALS

Please list all colleges/universities/vocational schools to which you have applied. Which one do you plan to attend? What do you plan to study? Award will be process upon submission of scholar's college invoice.

Reminder: award will be split between two semesters.

(If necessary, one page may be added to full describe this area)

EXTRACURRICULAR ACTIVITIES / VOLUNTEERISM

List all extracurricular activities (school and community) in which you have participated in the past four years. List all leadership positions and offices held. Check years during which you participated. If necessary, include additional sheets, using the format shown below.

ACTIVITY	2017	2018	2019	2020	LEADERSHIP POSITIONS/ OFFICES HELD	2017	2018	2019	2020

AWARDS, HONORS, AND RECOGNITIONS

List all awards and honors you have received.

NAME OF AWARD/HONOR/RECOGNITION	DESCRIPTION OF AWARD/HONOR/RECOGNITION	DATE RECEIVED

WORK HISTORY

Provide your work history. If necessary, include additional sheets using the format shown below.

DATES WORKED	NAME AND ADDRESS OF COMPANY	POSITION HELD	DUTIES	SUPERVISOR'S NAME AND PHONE NUMBER

LETTERS OF RECOMMENDATION

One letter of recommendation should be submitted with application. This nonfamily member should be <u>professional</u> (e.g., employer, school official, etc.) or <u>personal</u> (e.g., coach, pastor, etc.). *The quality of recommendation is a major factor for scholarship selection.*

Below, list the name of the recommender. If necessary, include additional sheets using the format below:

1.

Name

Title

Relationship

SIGNATURE

I hereby certify that all information and supporting documentation are true to the best of my knowledge. I understand that any knowingly false information may disqualify me from consideration for any AHAIN scholarship or be grounds for an offered scholarship to be rescinded.

If I am chosen as an AHAIN Scholarship recipient, I also grant permission for the AHAIN Scholarship Fund to reprint my personal statement/essay for use at the AHAIN Affordable Housing Conference and Annual Meeting. I additionally grant the use of my likeness by AHAIN and the AHAIN Scholarship Fund to promote and market the AHAIN Scholarship.

**ELECTRONIC TRANSMITTAL*: Electronic transmittal of application and supporting documentation to the ACCF/ AHAIN Scholarship Fund is certification that all information and supporting documentation are true to the best of my knowledge.

In addition, transmittal provides my agreement that any knowingly false information may disqualify me from consideration for an AHAIN scholarship, or be grounds for an offered scholarship to be rescinded. Actual electronic transmittal will be used as an electronic signature and date.

Application and all required supporting documentation must be received by the Scholarship Fund by the Application Deadline, first **Wed. in February** (by **4:00** pm EST), to be considered. Email this information to: ACCF@AdamsCountyFoundation.org.

Print Name

Signature

Date

If under 18 (Parent or guardian):

Print Name

Signature

Date

ACCF	1	AHAIN	Scholarship	2020
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This page may be neatly hand written.

	Student & Family Employme munity Foundation / 102 N. Second <u>asCountyFoundation.org</u> / Questions	Street / Decatur, I	N 46733 / Ph:	
Applicant's name:		Employment:		
Employment address:		Title:		
part-ti	ime (approx. # of hrs./wk:)	full	-time	
Mother's/guardian's name:		Day P	hone:	-
Place & Address of Employment:			Title:	
part-ti	ime (approx. # of hrs./wk:)	full	-time	
Father's/guardian's name:		Day P	'hone:	
Employment:			Title:	
part-ti	ime (approx. # of hrs./wk:)	full-	-time	
Siblings: (living with you and the	ose supported by your household - 50% or	more of the time):		
			Year in	Presently
<u>Relationship</u>	<u>Name</u>	Age	school	attending college?
l.)				🗌 yes 🛄 no
				∐ yes ∐ no
3.)				∐ yes ∐ no
4.)				∐ yes ∐ no
5.)				yes no
Family Matters:	Is there anything more you would (i.e. lay-off, illness, parent(s) in colle If you need addition:		child lives with your	

As some committees use this information to determine eligibility or selection, this information is necessary. Please check all that apply:

Family/College Experience:

	I am the first person (to include my siblings and par	ents) in my family to atten	d college.
	I have older sibling(s) in my family who have college I have I have Older sibling(s) who have Older sibling(s) who have	college experience.	
	My parents have college experience: My father has college experience. My mother has college experience.		My father has a college degree. My mother has a college degree.
Public	assistance received during the past 12 months (check a	ll that apply):	
	Temporary Assistance to Families	Trustee's Assistance	Food Stamps
	Supplemental Security Income (SSI)	Free or Reduced Lunch	Other:

APPLICATION CHECKLIST

Before submitting, ensure that your application is complete. Applications with missing documentation will not be considered by the Scholarship Selection Committee.

- Application Every applicable section is complete
- Property Manager/Supervisor completed the certification page
- Personal Statement/Essay Ensure the essay conforms to the subject as described on page 3
- Most recent school GPA transcript
- Letter of Recommendation Personal or Professional
- Student & Family Employment, etc. Information (page 6/9)
- Application Signed

If you have any questions, please contact the Adams County Community Foundation (ACCF) office at ACCF@AdamsCountyFoundation.org or 260-724-3939.

Residency and Good Standing Certification

(TO BE COMPLETED BY PROPERTY MANAGER AND SUBMITTED WITH SCHOLARSHIP APPLICATION)

Applicant Name	HOUSING ASSOCIATION OF
Apartment Community	Qndiana.
Apartment Property Manager	
Property Manager Office Phone	
Head of Household on Tenant Certification	
The Applicantand is currently in good standing.	is listed on the attached tenant income certification
Print Name	

Date

Signature

Title

Management Company

AFFORDABLE

Employee Good Standing Certification (TO BE COMPLETED BY SUPERVISOR AND SUBMITTED WITH SCHOLARSHIP APPLICATION)				
Applicant Name	Indiana			
AHAIN Member Employer				
Supervisor Name:				
Office Phone				
The Applicant	is currently an employee in good standing.			
Supervisor (Print Name)				
Signature	Date			
Title				
AHAIN Member Company				