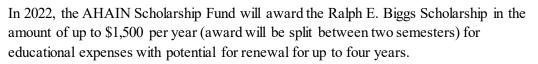
Affordable Housing Association of Indiana (AHAIN) AHAIN Scholarship Fund - Ralph E. Biggs Scholarship 2022 Application

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).



Scholarship eligibility requirements:

- 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 undergraduate 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;
- Must be a current AHAIN member employee, an AHAIN member resident, or a spouse or dependent child, (please explain your AHAIN association on page 8 or 9)
 - Priority is given to direct-descendants of the above descriptions
- 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 Wed., November 2, 2022 by 4:00 pm (eastern standard time).

Please be sure to:

- 1. Complete all applicable fields of the application.
- 2. Send all supporting documents, including: application, academic transcripts and signed letter of recommendation, to the ACCF@AdamsCountyFoundation.org.

Mail or email application, transcripts, and letter of recommendation: accf@AdamsCountyFoundation.org or mail to Adams County Community Foundation (ACCF) / 102 N. 2nd Street / Decatur, IN 46733 / questions? Please call: 260-724-3939

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: <u>www.AdamsCountyFoundation.org</u> scholarship / applications / AHAIN Scholarship Application				
Due Date / time:	We dnesday, November 2, 2022 by 4:00 pm (eastern standard time).			

Note: All decisions concerning selection of scholarship recipients are made by the **Adams County Community Foundation** (ACCF) Scholarship Selection Committee.

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, Wed., Aug 3, 2022. Note: In 2023, this due date is: Wed., June 7, 2023 by 4:00pm.

(Pages 1 and 2 are cover pages. It is not necessary to include these pages with this application submission)

PERSONAL INFORMATION

Address:	First		Middle
Street Address		Apartme	ent or Unit Number
City	State		Zip Code
Home Phone:	Cell Phone:		
E-mail:	Date of B	irth:	
	AHAIN MEMBER INFORMATI	ON	
Name of AHAIN Member Company/Pro	operty:		
Length of time at AHAIN Member Com			
Property Manager's Name and Phone N			
	PERSONAL STATEMENT		
"Describe your own unique, personal life vital component of communities through	*	lieve that affordable	e housing should be a
MOST	RECENT SCHOOL & TEST INF	ORMATION	
High School or College:			
	Jame	City	State
Graduation Date:			
Type of Diploma/Degree:	*High school GPA	.:	*College
GPA:	**ACT and/or SAT:		
*Send your school transcripts (unofficial is accumulated GPA scores in the space abov		Foundation.org. Wri	te your most recent
	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 processed 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	2019	2020	2021	2022	LEADERSHIP POSITIONS/OFFICES HELD	2019	2020	2021	2022

AWARDS, HONORS, AND RECOGNITIONS

List all awards and honors you have received.

NAME O F AW ARD/HONOR/RECOGNITIO N	DESCRIPTION OF AW ARD/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	POS ITION HELD	DUTIES	SUPERVISOR'S NAME AND PHONE NUMBER

LETTER 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 names of the recommenders. 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. <u>Application and all required supporting documentation must</u> be received by the Scholarship Fund by the Application due date: Wed., **November 2, 2022** (by **4:00** pm EST). Email this information to: ACCF@AdamsCountyFoundation.org. **Note:** In 2023, this due date is: Wed., June 7, 2023 by 4:00pm.

If 18 or older:

Print Name

Signature

Date

If under 18 (Parent or guardian):

Print Name

Signature

Date

ACCF / AHAIN Scholarship 2022 This	page may be neatly hand written.
Adams County Community Foundat	z Family Employment, etc. Information, ion / 102 N. Second Street / Decatur, IN 46733 / Ph: (260) 724-3939 <u>ion.org</u> / Questions? <u>accf@AdamsCountyFoundation.org</u>
Applicant's name:	Employm ent:
Employment address:	Title:
part-time (approx. # of	Thrs./wk:)
M other's/guardian's name: Place &	Day Phone: -
Address of Employment:	Title :
part-time (approx. # of hrs.	wk:)
Father's/guardian's name:	Day Phone: -
Place & Address of Employment:	Titl e:
part-time (approx. # of hrs Siblings: (living with you and those supported	wk:)
<u>Relationship</u> <u>Name</u>	Year inPresentlyAgeschoolattending college?
1.) 2.)	yes □ no □ yes □ no
1)	yes no
5.)	yes □ no □ yes □ no
(i.e. lay-off, illness,	parent(s) in college, grandparent/foster child lives with your family, etc.) you need additional space, please attach a separate page.
As some committees use this information to check all that apply:	determine eligibility or selection, this information is necessary. Please

Family/College Experience:

	I am the first person (to include my siblings a	and parents) in my family to attend	college.
	I have older sibling(s) in my family who have I have Older sibling(s) who h Older sibling(s) who h	ave college experience.	
	My parents have college experience: My father has college experience. My mother has college experience.	and / or \square My father has a and / or \square My mother has	college degree. a college degree.
Publi	ic assistance received during the past 12 mo	nths (check all that apply):	
	Temporary Assistance to Families Supplemental Security Income (SSI)	Trustee's Assistance	Food Stamps

APPLICATION CHECKLIST – almost done 🐵

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 (page 3, 4, this document)
	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 (as described on page 5)
	Application Signed (as appears on page 5)
	Student & Family Employment, etc. Information (page 6, this document)
BELO	W pages:
	Property Manager completed the certification page (page 8, this document)

Supervisor completed the certification page (page 9, this document)

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_____

AFFORDABLE HOUSING ASSOCIATION	
Indiana.	

Resident Name		
How are you associated to the Resident?		
Example: Self, spouse, child, s	stepchild, grandchild, etc.	
Apartment Community		
Apartment Property Manager		
Property Manager Office Phone		
Head of Household on Tenant Certification		
The Applicant is associated w	rith the Resident	_ who is listed on
the attached tenant income certification and is currently in	n good standing.	
Property Manager Printed Name	_	
Signature	Date	_
Title		
Management Company	_	

Employee Good Standing Certification (TO BE COMPLETED BY SUPERVISOR AND SUBMITTED WITH SCHOLARSHIP APPLICATION)	AFFORDABLE HOUSING ASSOCIATION
Applicant Name	Qudiana
AHAIN Member Employee	
How are you associated to the AHAIN Member Employee? Example: Self, spouse, child, stepchild, grandchild, etc.	
AHAIN Member Company	
Supervisor Name:	
Office Phone	
The Applicant is associated with who is currently an employee in good standing.	
Supervisor (Print Name)	
Signature Date	
Title	

AHAIN Member Company