

# ALBANY HOUSING

# AUTHORITY

Scholarship Foundation
Application



#### Dear Prospective Applicant:

The Albany Housing Authority has established an annual scholarship and laptop giveaway. This scholarship will assist students with the financial expenses of pursuing higher education. The applicant must be a tenant/resident residing in rental property owned, affiliated with, or subsidized by the Albany Housing Authority. This includes public housing residents and Section Eight participants. Recipients must be a senior in high school, presently enrolled as a full-time college student or a re-entry student pursuing academic, technical or vocational training. Three scholarships for the 2020 Fall Quarter or Semester will be awarded in the amounts of:

1<sup>st</sup> Prize-\$3,000.00 2<sup>nd</sup> Prize-\$2,000.00 3<sup>rd</sup> Prize-\$1,000.00

\*\*\*All finalist will be entered into a drawing for a free laptop

Deadline: Application must be postmarked or delivered no later than July 1, 2020.

**Submit to:** Albany Housing Authority Scholarship 200 South Pearl Street Albany, New York 12202

ATTN: Albany Housing Authority Scholarship Committee

# Applications postmarked or received after July 1, 2020 WILL NOT be reviewed

If you have any questions, please don't hesitate to contact us at scholarships@albanyhousing.org.

Thank you,

Albany Housing Authority Scholarship Committee 200 South Pearl Street Albany, New York 12202

### SELECTION CRITERIA

- 1. The applicant must be a tenant/resident residing in rental property owned, affiliated with, or subsidized by the Albany Housing Authority. All applications will be verified with applicable tenant records.
- 2. The applicant may be a senior in high school, a presently enrolled college student, or a re-entry student pursuing academic, technical or vocational training. The applicant must be accepted at an accredited academic, technical or vocational Institute.
- 3. The applicant must have a 2.5 or higher cumulative grade point average. (May be waived for re-entry/GED student out of school for at least five (5) years).
- 4. The applicant must submit a completed legible application.

# The following items <u>MUST BE SUBMITTED</u> with the application or it will not be reviewed:

- Completed application including the essay portion. Please type or print clearly.
- Completed Education Expenses and Funding Sources Work Sheet.
- A letter of reference (from employer, teacher, instructor, clergy, etc.). It cannot be from a household family member.
- Most recent high school and/or college transcripts or GED.
- A resume.

### ALBANY HOUSING AUTHORITY (AHA) SCHOLARSHIP APPLICATION

(Fill out application completely. Do not leave any blanks. PLEASE PRINT.)

1. APPLICANT NAME: _		2. SSN: **	**_**_		
3. HEAD OF HOUSEHOL	LD:	4. SSN: *:	4. SSN: ***-**		
5. APPLICANT'S RELAT	TIONSHIP TO HEAD	OF HOUSEHOLD:			
6. SECTION 8 A	.HA RESIDENT 🔲 B	OTH (please check on	e)		
7. MAILING ADDRESS:			<del></del>		
8. PHONE NUMBER: CI	ELL:				
НС	ME:				
	ORK:				
9. EMAIL:			<del></del>		
10. CURRENT NAME OI SCHOOL:	F HIGH SCHOOL, CO	LLEGE OR TECHNICA	AL/VOCATIONAL		
ADDRESS:					
11. ANTICIPATED GRA					
12. AREA OF STUDY/M	AJOR:	·			
13. COLLEGE, UNIVERS	SITY OR TECHNICAL	L/VOCATIONAL SCHO	OOL OF PLANNED		
ATTENDANCE:			<u> </u>		
ADDRESS:					
HAVE YOU BEEN ACC					
14. LIST EMPLOYMENT WORK):	HISTORY (INCLUD	E VOLUNTEER AND	COMMUNITY		
WORK).	DO NOT LEA	VE BLANK			
Employer, Volunteer & Community Work	Address	Phone Number	Period Worked		
I DECLARE THAT I HAVE READ A DECLARE THE INFORMATION PRO CAUSE MY SCHOLARSHIP APPLIC	OVIDED IS TO THE BEST OF M	Y KNOWLEDGE AND ANY MISE			
PRINT NAME OFAPPLICANT	SIGNA	TURE I	DATE		

NAME OF APPLICANT:	
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### **EDUCATION EXPENSES & FUNDING SOURCES WORKSHEET**

1.	(includ	itemize the costs of educational expenses for the 2020-2021 school year below de resources confirmed or anticipated). Also include any other grants, scholarships, or any other financial assistance from other institutions, friends, and/or family ers.
	a.	Cost of Tuition
	b.	Anticipated Cost of Books
	c.	Cost of Room & Board (if applicable)
	d.	Any other financial assistance confirmed (provide name of source):
		·
	e.	Any other financial assistance anticipated:
		·
		Total Anticipated 2020-2021 School Expenses:

NAME OF APPLICANT:	

### **ESSAY**

2. Please share a personal statement about significant experiences, community involvement, and the qualities of character and leadership important to achieving your goals. Highlight personal accomplishments, achievements, experiences and life circumstances that have helped form your character. Explain how you see the college education or vocational training improving your quality of life, and the impact receiving a scholarship would have on your life, educational, and career goals.

Please type your statement and attach to application. Keep your statement under 1,000 words.

## MEDIA AUTHORIZATION AND RELEASE FORM

I,Authority Scholarship for its excluphotographs, motion pictures, videoproduction of brochures, flyers, film except as set forth below on this for	o tapes, and ns and radi	r public relations or coll/or audio recordings	taken or made in the	als, all
I hereby authorize the Albany House publish or distribute any and all suctapes in connection with business of	ch photogra	phs, motion pictures,		
I agree to hold harmless Albany Ho Scholarship, its commissioners, off injury or damage arising out of, or photographs, motion pictures, video Essay in connection with publicity the Albany Housing Authority Scho	icers, agent in connection and audion and public	ts and employees from on with, any publication orecordings of my my relations relating to A	n any claim, liability, l on and distribution of self and of my Applic	ation
I understand that the determination Prizes is within the sole and absolu Committee and that their evaluation	te discretio	n of Albany Housing	•	
I understand and agree that I have r Housing Authority Scholarship's u		<u> </u>	-	any
Please select one:  \[ \subseteq \text{ Yes. I do give consent to red} \]	lease inforr	nation.		
□ No. I do not give consent to	release inf	formation.		
All applications will be considere	d regardle	ss of consent to relea	se information	
Signature (Parent/Legal Guardian must sign if Release is for a minor – under age 18)		Signature of Witness (Only if	applicant is a minor)	
Print Name	_	Name of Minor, if	applicable	
Mailing Address	City	State	Zip Code	
Cell No		Date		

By submitting this application I affirm that the information which I have provided on this application form and any additional material that I submitted related to the financial aid is complete, accurate, and true to the best of my knowledge. Pursuant to the Family Educational Rights and Privacy Act of 1974, as amended (FERPA), I hereby authorize the Albany Housing Authority Scholarship to release the scholarship application information provided by me, as well as other official and unofficial documentation regarding my academic information, status, and financial need, to the Albany Housing Authority Scholarship Committee for the purpose of providing the committee with information concerning my eligibility as a scholarship recipient. I also understand that furnishing false information may result in revocation of my application.

Signature (Parent/Legal Guardian must sign if Release is for a minor – under age 18)	Signature of Witness (Only if applicant is a minor)
Print Name	Name of Minor, if applicable
	Date