



2015

# Arizona College Scholarship Application

*(Please print or type all entries)*

## **APPLICANT INFORMATION**

\_\_\_\_\_  
Last Name, First Name

\_\_\_\_\_  
Date

Mailing Address:

\_\_\_\_\_  
Street

\_\_\_\_\_  
Apt/Suite #

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Program of Study

\_\_\_\_\_  
Start Date

Scholarship applying for (Check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Workforce Investment Act Participant Scholarship  | <input type="checkbox"/> Tribal Scholarship Participant  |
| <input type="checkbox"/> Workforce Investment Act Youth Scholarship        | <input type="checkbox"/> SRPMIC Scholarship              |
| <input type="checkbox"/> Trade Readjustment Participant Scholarship        | <input type="checkbox"/> Friendly House DACA Scholarship |
| <input type="checkbox"/> AZLeap  | <input type="checkbox"/> Other: _____                    |
| <input type="checkbox"/> Vocational Rehabilitation Participant Scholarship |  |

## **SCHOLARSHIP INFORMATION**

Workforce Investment Act Participant: Requires that the individual is enrolled in the Federal Workforce Investment Act program and is receiving “Intensive” or “Training” services at the time the program begins. Attach verification of enrollment in WIA to this application.

Workforce Innovation and Opportunity Act Youth Participant Scholarship: Requires that the individual is enrolled in the Federal Workforce Investment Act or Workforce Innovation and Opportunity act program under the “Youth” category and are receiving “Intensive” or “Training” services at the time the program begins. Applicants must attach verification of enrollment in WIA / WIOA to their scholarship application.

Vocational Rehabilitation Participant: Requires that the individual be an active participant in a State Vocational Rehabilitation Program. Attach a copy of your Rehabilitation Plan to this application.

Trade Readjustment Participant: Requires that the individual was a member of a worker group certified by the US Department of Labor to meet the eligibility requirements of the Federal Trade Act. Generally these are workers laid off as a result of international trade. Attach verification from the State Agency notifying you of your eligibility for benefits under Trade Act.

Tribal Scholarship Applicant: Requires that the individual is an enrolled member of a Federally Recognized Native American tribe who has applied to their tribe for a scholarship (continued)

or vocational training program for the current award year. Attach verification from your tribe that you have a pending scholarship or vocational training application for the current award year.

Salt River Pima Maricopa Indian Community Scholarship: Requires that the individual is an enrolled member of the Salt River Pima Maricopa Indian Community who has applied to the SRPMIC Education department for a scholarship for the current award year. Attach verification from SRPMIC- Education Department that you have a pending scholarship application for the current award year.

Friendly House DACA Scholarship: Requires that the individual has a work authorization card with the status of “Deferred Action” and is enrolled through Friendly House into the Federal Workforce Investment Act program and is receiving “Intensive” or “Training” services at the time the program begins. Attach verification of enrollment in WIA through Friendly House to this application.

AZLeap: Requires the individual to be a U.S. Citizen or eligible noncitizen, a resident of Arizona, enrolled at least half-time as an undergraduate student in a regionally or nationally accredited Arizona postsecondary institution, have substantial financial need (be eligible for the Federal Pell Grant) as determined by the Free Application for Federal Student Aid (FAFSA) and maintain satisfactory academic progress as determined by the institution.

Please provide a brief essay on why you qualify and deserve this scholarship:

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*Applicant: I understand that documentation indicating my qualification for the scholarship(s) being applied for will be required prior to any awards being made. I also understand that once awarded the award is only applicable to the program and start date indicated above. Scholarships may not be available to previously enrolled, returning students.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Final Determination:

Awarded                      Award Amount: \_\_\_\_\_  
 Not Awarded

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date