

WASHINGTON YOUTH ACADEMY FOUNDATION

Scholarship Program

PURPOSE: CONTINUING EDUCATION and EMPLOYMENT RELATED ASSISTANCE PREVIOUS AWARDEE

DEADLINES - At least one month prior to funding need

PREVIOUS AWARDEE APPLICATION

Previous applicants in good standing in their continuing education and/or employment programs may apply. You may apply every quarter or semester if in school.

WHAT YOU CAN EXPECT

1. An e-mail from a Board member confirming receipt of your application.
2. An e-mail confirming your application is in process. We will confirm with Academy staff that you have met your obligations for the Post-Residential Phase and Cadet Action Plan, if applicable.
3. An e-mail confirming the results of your application (normally within two weeks of your application being processed).

APPLICATION CHECKLIST

- Letter from you explaining your goals and plans (see page 3)
- Copy of your most recent school transcript
- (Optional) RPM/Academy Staff comments – attach
- (Optional) Letters of recommendation from your mentor, cadre, case manager, your school or employer or other non-family adult (you can have up to three letters)
- Completed Application

By signing below, you are confirming the attached application is COMPLETE and ready to forward to the Washington Youth Academy Foundation Scholarship Committee for review and final award determination.

Applicant

Date

If completing on-line by initialing this box you are electronically signing

Foundation Board Members

*Joe Huden
Board Chair*

*Michael McBreen
Vice Chair*

*Curt Pintler
Secretary*

*Morgan Barney
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*Jim Peterson
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Lowenberg*



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The goal of the Washington Youth Academy Foundation is to help as many cadets as possible. The WYA Foundation, along with Academy Staff, use an approach based on cadet's needs and available financial assistance funds when making a final determination.

Cadet Information:

Name: _____

Last, First, MI

Mailing Address: _____

Apt #: _____

(Street or PO Box)

(City, State and Zip Code)

Telephone/Cell: (____) _____

E-mail: _____

WYA Graduation Date: _____

(Month, Day, Year)

Check what applies to you:

4-year College or University

2-year Community or Junior College

Vocational or Technical School Job Training/Supplies/Equipment

Apprenticeship/Internship Expenses Other Job-related Support

NAME of the School, Training Program or Company you've applied to or attending: _____

SCHOOL OR COMPANY DEADLINE DATES: Registration: _____

(Month, Day, Year)

Payment of Funds: _____

(Month, Day, Year)

Have you been ACCEPTED by the School or Company you've applied to? Yes No

IF YES, what is your expected START DATE? _____

(Month, Day, Year)

School, Training Program or Company Information:

Provide CONTACT INFORMATION for the School, Training Program or Company:

Person's Name: _____

Title: _____

Telephone: _____

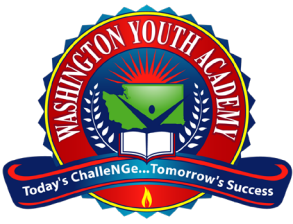
Email: _____

Mailing Address: _____

(Street/PO Box, City, State and Zip Code)

Pay to the Order of: _____

(WYAF Treasurer will coordinate payment for job-related support items)



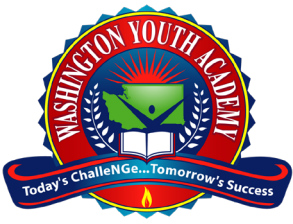
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Financial Support Requested: Describe the TYPE OF SUPPORT you're requesting in detail; i.e. tuition, tools, books, clothing, fees, etc. and the amount of your request: _____

Tell us about you. (NOTE: this section supports your application, be as detailed as possible) (What is your current GPA, any awards, extra-curricular activities, when do you plan to graduate). Question to answer (describe your goals and plans for continuing your education or employment)



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PLEASE SUBMIT YOUR APPLICATION BY E-MAIL FOR FASTEST ACTION:

**Submit by e-mail to:
wyaf-financial-assist@outlook.com**

Or Submit by mail to (*mailing may delay your decision*):
Washington Youth Academy Foundation
Attn: Scholarship Program Committee
1207 Carver St W
Bremerton, Washington 98312

IF you have ANY questions about this application, please contact the Washington Youth Academy Foundation by e-mail chair@wyafoundation.org.

THANK YOU for working toward YOUR FUTURE!