WASHINGTON YOUTH ACADEMY FOUNDATION

Financial Assistance Program

PURPOSE: CONTINUING EDUCATION RELATED ASSISTANCE

DEADLINES – One month prior to start date.

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).

WHO CAN APPLY?

1. Residential or Post-Residential cadets who are high school graduates (or GED) in good standing, i.e. meeting the standards of Residential or Post-Residential criteria as verified by the WYA staff.

2. ChalleNGe graduates (out of Program) who are High School graduates (or GED) and continue to meet ChalleNGe standards as verified by the WYA staff.

3. Other similar programs may be considered, to include pre-employment requirements.

NOTE: Previous applicants in good standing in their continuing education and/or employment programs may continue to apply using the PREVIOUS AWARDEE APPLICATION.

APPLICATION CHECKLIST

- ☐ Completed application (Sections 1 through 4)
- ☐ Copy of your high school diploma or GED certificate
- ☐ Letter of acceptance from the school
- ☐ Details from you explaining your goals and plans (see Section 4)
- ☐ Letters of recommendation from your mentor, your school or other non-family adult (you can have up to three letters)
- ☐ Signed Release of Information Form
- ☐ (Optional) Academy staff recommendation - attach

INCOMPLETE application packets MAY NOT BE CONSIDERED

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**

Rev 10/25/2018

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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.

Section 1 Cadet Information:

Name: _____

(Last, First, Middle Initial)

Mailing address (Street or PO Box): _____

Apt #: _____ City, State, Zip Code _____

E-mail address: _____ Phone #: _____

WYA class cycle/ graduation date: _____

What Program Phase are you: ☐ Residential Phase ☐ Post-Residential Phase ☐ Out of Program

Section 2 School Information:

Check what applies: ☐ 4-year College or University ☐ 2-year Community or Junior College

☐ Vocational School ☐ Technical School ☐ Other (explain): _____

Name of school: _____

Your student ID Number: _____

School financial aid contact name: _____

School contact e-mail: _____

School contact phone number: _____

Deadline dates: Registration _____ Payment of funds: _____

Section 3 Financial Support Requested:

Describe in detail the type of support you are requesting, i.e. tuition, books, fees, etc. Be sure to include the amount you are requesting.

_____

_____

_____

_____

_____ Amount requested: $_____

Section 4 Personal Story:

Minimum 200 words. Tell us about you. What is your current GPA, any awards, extra-curricular activities, demonstrated leadership, community service and classes taken? Describe your goals and plans for continuing your education. Add any information to help the committee make an informed decision.

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RELEASE OF INFORMATION FORM

To Whom It May Concern:

Information requested will be confined to basic information required by the Washington Youth Academy Foundation for awarding scholarships, employment and educational assistance and statistical purposes. In some cases, this information is necessary to determine eligibility for the release of scholarship money and incentives from the program to the graduate.

Information requested may include:

- School: Date of enrollment, attendance, total credit hours, area of study, date exited, student identification (ID) number.
- Employment: Current and past employment status, date of hire, hours worked weekly, hourly wage, job description (duties), name of supervisor and phone number, date of termination or quit, rehire status.
- Applications typically do not require Driver's License numbers or Social Security numbers, but we may inquire based on requests that may ask for that may ask for that information.

I _____ *(Print-students Full Name)* hereby authorize the release of my employment, education, and related information to the Washington Youth Academy Foundation. This release is applicable during the Residential, Post-Residential Phase, and in some cases future dates while in education programs.

Failure to release this information may result in the application being returned without action.
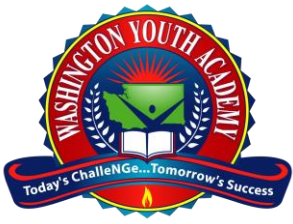
_____   _____

Applicant Signature   Date

_____   _____

Parent Signature   Date
(If applicant is currently under the age of 18 yrs old)

Requestor's Address:
Washington Youth Academy Foundation
Attn: Scholarship Program Committee.
1207 Carver St W
Bremerton, Washington 98312

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 your Case Manager at the Washington Youth Academy or e-mail chair@wyafoundation.org.

THANK YOU for working toward <u>YOUR</u> FUTURE!