

# WASHINGTON YOUTH ACADEMY FOUNDATION

## Financial Assistance Program

**PURPOSE: CONTINUING EDUCATION 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 programs may apply. You may apply every quarter or semester while 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**

- Completed application (Sections 1 through 4)
- Copy of your most recent school transcript (or explain in section 4)
- Optional) Academy staff recommendation
- (Optional) Letters of recommendation from your Mentor, your school or other non-family adult (you can have up to three letters)

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

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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:

### **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:

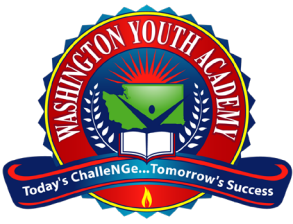
Deadline dates: Registration:

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: \$



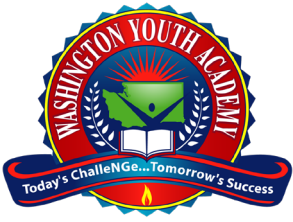
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### **Section 4 Personal Story:**

Minimum 200 words. Tell us about you. What is your current GPA, any awards, extra-curricular activities, 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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**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](mailto:chair@wyafoundation.org).**

**THANK YOU for working toward YOUR FUTURE!**