



# WASHINGTON YOUTH ACADEMY FOUNDATION

## Financial Assistance Program

**PURPOSE: 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 programs may apply. You may apply every quarter or semester while in school.

#### **Foundation Board Members**

*Michael McBreen  
Board Chair*

*Tammy Neese  
Vice Chair*

*Curt Pintler  
Secretary*

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Chair Emeritus*

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Member*

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Member*

*Jim Peterson  
Member*

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Member*

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Member*

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Ex-Officio*

#### **Honorary Board Members**

*Governor  
Christine Gregoire*

*Congressman  
Norm Dicks*

*Major General  
Timothy J.  
Lowenberg*

#### **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)
- Optional) Academy staff recommendation
- (Optional) Letters of recommendation from your mentor, your employer 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 Training/Employment Information:**

Check what applies:  Job training  Employment supplies or equipment

Apprenticeship expenses  Internship expenses  Other (explain):

Name of training program or employer:

Your training/employment ID Number (if applicable):

Training or company contact name:

Contact e-mail:

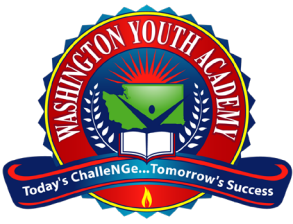
Contact phone number:

Have you been accepted for training or employment?  Yes  No

What is your start date?

### **Section 3 Financial Support Requested:**

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



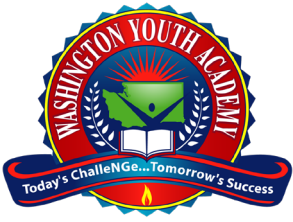
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### **Section 4 Personal Story:**

Minimum 200 words. Tell us about you. What is are you doing now, any awards, extra-curricular activities, community service and classes taken. Describe your goals and plans for continuing your training/employment. 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!**