ADULT LEARNER SCHOLARSHIP FUND

**Short-term credential application**

**What is the Adult Learner Scholarship?** This scholarship is for non-traditional students who want to change their life for the better through education and training. The scholarship supports a range of training, including two- and four-year colleges and universities, completing a certificate and other non-degree programs, or attempting a self-directed learning experience with a clear goal.

**Who should apply for a “short-term” award?**

You should complete this application if your program meets the following criteria:

1. Your program lasts one semester or less.
2. At the end of your program you will have a certificate or workplace credential, not a degree.
3. You will not need to renew your award to finish your program.

The short-term award will have a rolling deadline and applications will be considered as they are received. Decisions will be made within one week. Please apply as soon as you are able to before your program starts. **NOTE: We cannot fund programs that have already started.**

**Who is eligible to apply?**

To be defined as a “non-traditional student,” you must meet ONLY ONE of the following criteria:

* be over the age of 25 or
* work full-time (35 hours/week or more) while being enrolled or
* have dependents other than a spouse or
* be financially independent from parents and/or considered independent for FAFSA purposes or
* did not receive a standard high school diploma (completed with a GED, HiSET, or certificate of completion) or
* have delayed enrollment in college after high school for a reason other than a gap year activity.

You may apply for this scholarship if you are enrolled full-time or part-time. *Important: Unless you are asking for support for a self-directed learning experience, your program must be accredited by a nationally recognized accreditation agency*.

**How much are scholarships and who receives awards?**

The scholarships are up to $1,500, depending on individual need. When they make decisions, the scholarship committee looks for financial need, preparation to enter the training program, a solid goal and a plan to succeed.

**What preparation is required?**

We know that people who seek out help before entering a training program are more likely to succeed. We strongly recommend preparing for your program by talking with your local Career Center, Maine Educational Opportunity Center, Adult Education center, Finance Authority of Maine College Access counselor, or other workforce advisor. They will help you find the best program for your goals and could help you save time and money.

***If you have any questions about the program, student eligibility, or the application, please contact:***

***Jackie Shannon, Maine Community Foundation, at*** [***jshannon@mainecf.org***](mailto:jshannon@mainecf.org)

## Adult Learner Scholarship

Short-term Certificate Application

1. **Start by sharing your contact information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Street address or P.O. number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_ Zip code: \_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Male ( ) Female ( ) Non-binary/Gender Non-conforming ( ) Would prefer not to disclose( )

**Please indicate how you identify yourself (check one):**

* American Indian or Alaskan Native
* Arabic
* Asian
* Black or African American
* Hispanic or Latino
* Native Hawaiian or other Pacific Islander
* White
* Multiracial
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Prefer not to answer

1. **Tell us what you would like to do:**

Where would you like to enroll (name of institution): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been accepted already? Yes \_\_\_ No\_\_\_ Is this an online program? Yes\_\_\_\_ No\_\_\_\_\_

What is the name of the training program? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are the dates of the program? Begin date: \_\_\_\_\_ End date: OR Ongoing\_\_\_\_\_\_\_\_\_

**NOTE: We cannot fund programs that have already started.**

Will you be enrolled: Part-time: \_\_\_\_\_\_\_\_\_\_\_ Full-time: \_\_\_\_\_\_\_\_\_\_\_

1. **Tell us about your past education:**

Do you already have a college degree? Yes \_\_\_ No\_\_\_

If so, list your college, major, degree, and year of graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you graduated from high school, what year: \_\_\_\_\_\_\_\_\_\_

If you didn’t graduate, did you complete your GED, HiSET, or alternative diploma? Yes\_\_\_ No\_\_\_

Year completed: \_\_\_\_\_\_\_\_\_

1. **What steps you have taken to prepare for your training program? (check all that are true for you)**

* Maine College & Career Access/College Transitions through Adult Education
* Utilized other Adult Education resources
* Talked with Maine Educational Opportunity Center (MEOC) or FAME advisor
* Worked with a Career Center
* Participated in an educational program during incarceration, release or reentry
* Currently enrolled in college
* Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(please specify)
* No formal program

1. **Tell us a little about your work history.**

Are you currently employed? Yes\_\_\_ No\_\_\_

Who is your employer? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your position or title? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you worked there? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many hours per week do you work now? \_\_\_How many hours will you work while in school? \_\_\_\_

Does your employer provide tuition assistance? Yes \_\_\_\_ No \_\_\_\_

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Use this form to estimate how much your training will cost and how you will pay for your training.** *(Note: the Maine Community Foundation cannot pay for past educational efforts.)*

**Is this program eligible for federal financial aid?** Yes\_\_ No\_\_

**We will not accept your application if you leave this section blank. Contact your program to find out the cost.**

|  |  |
| --- | --- |
| What it will cost | |
| Tuition and Fees (base cost of the training) | $ |
| Books and Materials (required equipment, such as tools or uniforms) | $ |
| Transportation (estimate cost of gas to attend training) | $ |
| Child care (if necessary to attend training) | $ |
| **TOTAL** | $ |
| **Please list what funds you have available to pay for this training. (Scholarships, employer tuition support, personal savings, etc.)**  *(Hint: if you have your financial aid letter, use it to help you estimate.)* | $ |

**Estimate your total monthly household income: ­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**7) Tell us about yourself.** Please share with the Adult Learner Advisory Committee how your life will be different if you pursue this course of study. You may type directly into this document or attach another page.

* What is your goal and why are you pursuing it? If you are pursuing a career change, or if you have a degree in a different field, please explain in detail why you are making this change.
* Why have you chosen this particular training/licensing program as opposed to a different program?
* Starting a new project or program will inevitably bring challenges; what challenges do you see ahead and how will you address those challenges? What is your plan to succeed?
* ·How will you meet the cost of this training program?

**8) Application checklist.** Please go through this list and make sure you have taken care of all the required parts.

* **Your contact information:** you gave us a mailing address, phone number and email address that you check frequently.
* **Program information:** you told us what training or program you would like to do and gave us correct contact information.
* **Your past education:** you fully answered the questions about what you’ve done in the past.
* **You talked about your preparation:** you answered questions about your preparation process and gave contact information for the program.
* **You told us about your employment history:** you told us where you are working now and how you plan to work while in school.
* **You filled out the budget:** you estimated your costs and what funds you have available.
* **You told us about yourself:** you wrote a personal statement that answered all of the questions we asked.

**Signature**

It is the responsibility of the applicant to ensure that all of the required items are submitted before the application will be considered.

I certify that all information on this form is true and complete to the best of my knowledge.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

**All applications must be complete to be considered. If information/materials are sent separately, the application will not be considered until all items are received. Please send to:**

Adult Learner Scholarship

Maine Community Foundation

245 Main Street

Ellsworth, ME 04605