# A logo with white text Description automatically generated Adult Learner Long-Term Scholarship Alternative Application

## Guidelines

### This application is designed specifically for applicants who are incarcerated. If you are not an incarcerated applicant, please visit [www.mainecf.org](http://www.mainecf.org) and use the online 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 earning a degree at 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 will last more than one semester.
2. At the end of your program you will have a one- or two-year certificate or a degree.
3. You may need to renew your award to finish your program. Renewals require a 2.0 GPA or higher.

Deadlines are June 15 and November 15. Late applications are not accepted. Decisions will be made within six weeks. Please allow ample time before your program begins when applying.

**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. Applicants must have completed the Free Application for Federal Student Aid (FAFSA) if they are eligible to do so. **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 between $1,000 and $2,500, depending on individual need. Awards may be limited by DOE/DOL regulations and will not be refundable to the student.

**What does the committee consider in making awards?**

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. For incarcerated applicants, the committee also considers whether the educational request is in support of recovery and reentry success. Overall, about a third of applicants receive awards.

**What preparation is required?**

The committee knows that people who seek out help before entering college are more likely to succeed and supports applicants who have thoughtfully prepared for their program. Therefore, we require that applicants work within a structured advisory program if it is offered, or seek help from a teacher, advisor, or mentor if not.

If you have any questions about the Adult Learner Long-Term Scholarship program, student eligibility or the application, please contact **Jackie Shannon** at jshannon@mainecf.org.

# Adult Learner Long-Term Scholarship Alternative Application

### Contact Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name:** |  | | | | | |
| **Mailing street address or P.O. number:** |  | | | | | |
| **City:** |  | | | | | |
| **State:** |  | | **ZIP Code:** | |  | |
| **Phone:** |  | | | | | |
| **Email address:** |  | | | | | |
| **Date of birth:** | *Month:* |  | *Day:* |  | *Year:* |  |
| **Gender:** | ☐ Male ☐ Female ☐ Non-binary ☐ Prefer not to disclose | | | | | |
| **Please indicate how you identify yourself by checking 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 | | | | | |
| **Name of correctional facility:** |  | | | | | |
| **Education contact’s name and email address:** |  | | | | | |
| **Time left in term of incarceration:** |  | | | | | |

### Education Plans

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of institution:** |  | | |
| **City:** |  | | |
| **State:** |  | **ZIP Code:** |  |
| **Have you been accepted already?** | ☐ Yes ☐ No | | |

### Education Plans *(continued)*

|  |  |
| --- | --- |
| **Is this an online program?** | ☐ Yes ☐ No |
| **What is the name of the training?** |  |
| **What is the program or major?** |  |
| **Program type:** | ☐ Certificate ☐ Associate’s degree ☐ Bachelor’s degree |
| **Enrollment type:** | ☐ Full-time ☐ Part-time |
| **How many years left until you complete the program?** |  |

### Past Education

|  |  |
| --- | --- |
| **Have you attended college before?** | ☐ Yes ☐ No |
| **If you already have a degree, list your collect, major, degree and year of graduation.** |  |
| **Did you graduate from high school?** | ☐ Yes; indicate year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  ☐ No |
| **If you did not graduate high school, did you complete your GED, HiSET or alternative diploma?** | ☐ Yes; indicate year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  ☐ No |

### Training Program Preparation

|  |  |
| --- | --- |
| **What steps have you taken to prepare for your training program? Please check all that are true for you.** | ☐ Maine College & Career Access/College Transitions through Adult Ed  ☐ Utilized other Adult Education resources  ☐ Talked with Maine Educational Opportunity Center or FAME advisor  ☐ Worked with a Career Center  ☐ Participated in ed. program during incarceration, release or reentry  ☐ Currently enrolled in college  ☐ Discussed your plans with your educational director  ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ☐ No formal program |
| **Advisor’s contact name and title:** |  |
| **Advisor’s phone number and email address:** |  |

### Training Program Costs

Note: MaineCF cannot pay for past educational efforts. We will not accept your application if you leave this section blank. Contact your program to find out costs.

|  |  |
| --- | --- |
| **I have attached my FAFSA report.** | ☐ Yes ☐ No |
| **If you are not eligible for the FAFSA, indicate why.** |  |

### Cost Estimates

|  |  |
| --- | --- |
| **Cost of Tuition and Fees** *Base cost of the training.* | $ |
| **Cost of Books and Materials** *Required equipment, such as tools or uniforms.* | $ |
| **Total Cost** *Add the lines above.* | $ |

### Fund Estimates

|  |  |
| --- | --- |
| **Personal Savings or Earnings You Will Use Toward Tuition** | $ |
| **Pell, Second Chance Pell or State of Maine Grants** | $ |
| **Other Scholarships, Grants or Aid** *Such as outside scholarships or employer support.* | $ |
| **Aid to Incarcerated Individuals** | $ |
| **Other**  *Please explain.* | $ |
| **Total Fund Estimates** *Add the lines above.* | $ |
| **Current Student Loan Balance:** | $ |

### Personal Details

In a one-to-two-page essay, please share with the Adult Learner Advisory Committee how your life will be different if you pursue this course of study.

Please address the following questions:

* What is your goal? Why are you pursuing this particular goal?
* How have you prepared for this program?
* What is your academic plan to succeed?
* How have your past experiences prepared you for this step?
* How does this fit into your recovery and/or reentry plan?

### Transcript

You should include the most recent transcript available to you. That could be a college transcript (even if you didn’t complete), a high school transcript, GED or HISET scores, a translated transcript from another country, or something similar. Please enclose your transcript with this application.

### Recommendation Form

Please give or send the attached form to someone who is familiar with your plan and can speak to your ability to complete your program. If you have a program advisor, this form must be completed by that person. The person writing the letter should submit it directly to the Maine Community Foundation. Note: this should be a professional reference and should not be from friends or family members. **We prefer a reference from someone advising you on your educational journey, such as a teacher, MEOC advisor, FAME counselor, or education director.**

### Application Checklist

|  |  |
| --- | --- |
| **Please review this list and make sure you have taken care of all 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 info 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, as well as filled out your FAFSA and attached it OR told us why you aren’t eligible.  ☐ **You told us about yourself:** you wrote a personal essay that answered all of the questions we asked.  ☐ **Your transcript:** you attached your most recent high school transcript, college transcript, or HiSET/GED scores.  ☐ **Your letter of recommendation:** you gave the recommendation form to someone to fill out on your behalf. We prefer a reference from someone advising you on your educational journey, such as a teacher, MEOC advisor, FAME counselor, or education director. |

### Certifications

It is the responsibility of the applicant to ensure that all of the required items are submitted on or before the application deadline. Incomplete applications or those postmarked after June 15 or November 15 will not be considered. I certify that all information on this form is true and complete to the best of my knowledge.

By signing my name below, I give my permission for MaineCF to discuss my financial aid with my college. This includes discussion of the information contained in my FAFSA, my financial aid offer, and my enrollment status.

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

All applications and required information must be postmarked by June 15 or November 15 and sent to:

**Adult Learner Scholarship**  
Maine Community Foundation  
245 Main Street  
Ellsworth, ME 04605

# Adult Learner Long-Term Scholarship Alternative Application

### Recommendation Form

We prefer a reference from someone advising you on your educational journey, such as a teacher, MEOC advisor, FAME counselor, or education director.

|  |  |
| --- | --- |
| **Name of person being recommended:** |  |
| **Name of program they plan to attend:** |  |

The above candidate is applying for an Adult Learner Scholarship at the Maine Community Foundation. This scholarship is for non-traditional students who want to change their life for the better through education and training. It 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. When they make decisions, the scholarship committee will be looking for financial need, a solid goal and plan, and a commitment to stay in Maine. Please submit completed form via email to: [jshannon@mainecf.org](mailto:jshannon@mainecf.org).

|  |  |
| --- | --- |
| **Name of person completing form:** |  |
| **What is your relationship to applicant?** |  |
| **What are the first words that come to mind when describing this student?** |  |
| **What are the applicant’s strengths?** |  |
| **Please rate the student in the following areas using the scale provided. A score of 1 indicates weakness in an area; a score of 3 indicates average in an area; and a score of 5 indicates strength in an area.** | |
| *Ability to make an execute a plan:* | ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 |
| *Resilience in overcoming obstacles:* | ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 |
| *Seriousness of purpose:* | ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 |
| *Potential for succeeding in their program:* | ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 |
| **Please share any comments or concerns about this applicant that you think may be of help. You may attach a letter if you prefer.** |  |

**Signature of Person Completing Form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Thank you for your support of the applicant.*