



Traditional Student RESIDENT SCHOLARSHIP APPLICATION GENERAL INFORMATION

1. All applications must be received by July 1st, 2024 at Noon by FLCARH Scholarship Foundation, Inc
2. All applicants must meet the following criteria:
 - A. Have a minimum of a "C" average in high school or college.
 - B. Expect to graduate in the Spring of 2024 from High School or have already graduated from High School.
 - C. Must be accepted or currently enrolled at an accredited vocational or technical school, college, or university if not already enrolled.
 - D. Cannot already have an associate's degree or higher.
 - E. Must be listed as a resident on the current tenant certification at a member complex, live in an income-restricted income unit, and have lived at that complex for at least six months.
 - F. Must be in good standing with both the management company and the property in which you reside.
 - G. Can be a Resident Manager or Maintenance Technician living in a FLCARH member property
 - H. Any member of a resident manager or maintenance technician household, including the resident manager or maintenance person is also eligible to apply provided that the entire household is certified income-eligible under general requirements.
- 3 . The scholarship awards will be made to only qualified tenants or resident family members who meet the above criteria and are living at an apartment complex that is a member of the Florida Council for Affordable and Rural Housing.
- 4 . Funds are to be utilized beginning with the 2024-2025 school year.
- 5 . The applications will be judged on academic achievements, school attendance, work performance, career goals, extracurricular school activities, community activities, and other achievements. Extenuating circumstances and needs may also be considered. Success in core curriculum courses, in particular, will be considered in evaluating academic achievements. The FLCARH Board will select awardees from all applicants at its sole discretion. The FLCARH Board or its designee may choose to interview the applicants.
- 6 . The scholarship recipients and their respective managers will be notified by August 1, 2024
7. The scholarship will be administered by the institution attended by the recipient. Funds may be used for books and/or tuition for one year or longer if approved by FLCARH Scholarship Foundation. The recipient's failure to continue the required course of study or **maintain a "C " average** will cause the unused portion of funds to revert to the Scholarship Foundation. Recipients must be registered or register for the minimum credit hours to be determined as a **full-time** student by the institution.



Traditional Student

FLCARH Scholarship Instructions

- 1 . Complete and sign the attached application form. Use extra sheets for responses when necessary.
- 2 . Please have your **High School Guidance Counselor** complete and sign the relevant portion of the attached application. Use extra sheets for responses when necessary. **(This may be disregarded by college students but must be substituted with college transcripts showing courses completed, current courses enrolled in, and grades for each course. This may also be disregarded by applicants who are not presently attending High School or college, but a high school transcript will be required.)**
3. The following **MUST BE SUBMITTED WITH THE APPLICATION:**
 - A. Attach an essay, **typed** in 3 0 0 words or less describing any extraordinary circumstances or special factors that may affect your financial need.
 - B. Attach **three (3)** or more letters supporting the academic record, school attendance, character, work experience, achievements, and potential for education and career advancement of the applicant. Attach at least one letter from a teacher of an academic class that the applicant is currently enrolled in (if applicable). The second letter may be from a school official such as a principal or counselor. The third letter may be from ministers, coaches, employers, past teachers, or any person with significant knowledge of the applicant. **(This section may be disregarded if you are not presently enrolled in High School but would enhance your application.) The letters should not be from any person related by blood or marriage to the applicant.**
 - C. Attach a photocopy of the applicant's ACT score report or SAT score report.
 - D. Attach a copy of an acceptance letter to the chosen college or university.
 - E. College students must submit a current transcript from their college including courses completed to date, courses currently enrolled in, grades, and signature from the registrar's office or applicable governing office.
 - F. Attach certification from the apartment manager concerning your membership in the household along with a copy of the current tenant income certification showing your membership in the household. **(The certification form is attached and must be signed by the apartment manager.)** Also, attach a letter from the Management Company and from the Property where you reside that states you are in good standing.
 - G. **Attach a 3 X 5 Current photograph (taken within the last three months)** (will be used only for promotional purposes if awarded scholarship).

Applications and other required documents must be received at the address below on or before **July 1st, 2024 at noon** EST. This application deadline is firm as to date and time. Please mail the application to:

FLCARH SCHOLARSHIP FOUNDATION, INC.
c/o Florida Management Associates Inc.
PO Box 2260 Tallahassee, FL 32316 Phone: 850-8 9 3-7650

Traditional Scholarship Application Checklist

Incomplete applications will not be considered. It is important, therefore, that you review your application to ensure it is complete when submitting it. Use the below checklist to assist you in this regard:

Check (X) if attached	<u>Must Be Submitted With the Application</u>
_____	Scholarship Application
_____	Copy of Applicant's ACT score report or SAT score report and highs
_____	Letters of Recommendation: A minimum of 3 required; one from a current teacher, one from a school official and one from employer, coach, minister, past teacher, or any person with knowledge of you.
_____	Essay (3 0 0 words or less)
_____	Copy of college or university acceptance letter or, if already a college
_____	Certification from Apartment Manager along with your household's current tenant income certification
_____	Good Standing Certification (from Apartment Manager)
_____	Current (3 X 5) photograph taken within the last 3 months



Traditional Student
Florida Council for Affordable and Rural Housing
Scholarship Application 2024

Full Name: _____

Last

First

Middle

Mailing Address: _____

Street Address

City

County

State

Zip

Home Phone: _____

Daytime Phone: _____

Email: _____

Fax: _____

Date of Birth: _____ Apartment Complex: _____

Management Company: _____

Manager's Name: _____

Manager's Office Phone: _____

Are you currently attending high school? Yes, Anticipated Graduation Date: _____

No, Date You Graduated: _____

High School: _____

Name

City

County

High School GPA (40Scale): _____

ACT Composite Score: _____

Or SAT Composite Score: _____

If applicable: Vocational, Technical School or College/University:

 Name City County

Undergraduate GPA (4.0 Scale): _____ (attach a copy of transcript) Expected

Graduation: _____

Date: _____ Degree: _____ Major: _____ Registrar office number: _____

Do you currently have or expect to have any of the following:

Scholarships: YES / NO If yes, please list all scholarships expected including:

How Much? _____ and How Long? _____

Government Grants: YES / NO If yes, how much? _____

Student Loans: YES / NO If yes, how much?

EMPLOYMENT

Are there any other sources of college funding? _____

List all job employment in which you have received wages during the past 4 years (e.g. cashier, restaurant worker, receptionist, errand runner, maintenance work, etc.)

Position	Location	Dates Held
Position	Location	Dates Held
Position	Location	Dates Held
Position	Location	Dates Held

AMBITIONS

Have you already been accepted to college or university or vocational/technical school?

YES / NO

If so, where? _____

Name (If yes, attach copy of acceptance letter)	City/ST
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Where do you plan to attend? _____

If you receive this scholarship, where do you plan to attend? _____

What is the average annual tuition cost of where you plan to attend?

When do you plan to graduate? _____

What kind of degree and career do you plan to pursue? _____

Traditional Student Scholarship Application

***Please have your **High School Guidance Counselor** complete and sign the following portion.
(DISREGARD THIS SECTION IF PREVIOUSLY GRADUATED FROM HIGH SCHOOL and instead attach a copy of your college transcript showing Year to Date Classes taken and grades for each class. This must be signed by the Financial Aid Office or Registrar's Office of your school.)

Applicant's Name:

I waive do not waive my right to access information on this Guidance Counselor Form.

Applicant's Signature:

Class Rank: _____ of

Senior Guidance Counselor: _____ Phone: _____

Please comment on this applicant's attendance record:

Please comment on this applicant's school activities/awards:

Please comment on any extracurricular activities:

Please comment on this applicant's conduct in school:

Other Comments: _____

Conduct Grade: _____ Counselor's Signature: _____

Counselor must attach a signed copy of the high school transcript and ACT composite or SAT

FINANCIAL NEED

In this section please explain any extraordinary circumstances or special factors that may affect your financial need. Please TYPE a short essay in 300 words or less.

By submitting this application, I authorize my high school or higher education institution to make available to the FLCARH SCHOLARSHIP FOUNDATION, INC. ("the Scholarship Fund") and its agents any and all information concerning my academic record and any other pertinent information. I certify that all of the information in this application is true and correct to the best of my knowledge and that I meet the eligibility requirements outlined in this Application, I further authorize the Scholarship Fund to disclose my name, address, and photograph in connection with promotional activities concerning the Scholarship Fund and to schools and colleges.

Applicant Signature: _____ Date: _____

Parent or Guardian's Signature (if under age 19): _____ Date: _____

Traditional Student Scholarship Application

RESIDENCY CERTIFICATION

(TO BE COMPLETED BY RESIDENT MANAGER)

Applicant Name: _____

Apartment Complex: _____

Apartment Manager: _____

Manager's Office Phone: _____

Head of Household on Tenant Certification: _____

The Applicant _____ is listed on the attached tenant income certification. **NOTE: Be sure to attach tenant income certification.**

Managers name (print): _____

Signature: _____

Title, Name of Complex: _____

Management Company: _____

Traditional Student Scholarship Application

GOOD STANDING CERTIFICATION

(TO BE COMPLETED BY RESIDENT MANAGER)

Applicant Name: _____

Apartment Complex: _____

Apartment Manager: _____

Manager's Office Phone: _____

Head of Household on Tenant Certification: _____

The Applicant: _____ is currently in good standing.

Manager (print name): _____

Signature: _____ Date: _____

Title: _____ Name of Complex: _____

Management Company: _____