Non-Traditional Scholarship



3515 N. Main St., Suite C, Mishawaka, IN 46545 574.259.0522 www.scholarshipfoundation.org

RENEWAL

Mission

We seek to provide financial and other support to recognize the commitment, efforts, and financial challenges of adults as they balance their family, work, and school responsibilities in order to achieve their educational goals.

Our Non-traditional Student

You may identify as a Non-traditional Student if you meet one or more of the following:

- Are over the age of 24,
- Are married, separated, divorced, partnered,
- Work full-time or part-time,
- Have dependents (usually children but sometimes others to support),
- Are returning to or starting college after a break,
- Are changing careers,
- Are a veteran of the armed forces or currently serving on active duty for purposes other than training.

Applicant Eligibility

You are eligible if you can identify with one or more of the above and <u>all</u> of the below:

- Are a resident of St. Joseph County, IN and
- Are a U.S. citizen or have proof of pending naturalization and
- Have graduated from high school/homeschool or have a GED and
- Are enrolled in a minimum of 6 credit hours per semester or have been accepted to a degree program or vocational skills training program and
- Have completed the Free Application for Federal Student Aid (FAFSA) at <u>www.fafsa.ed.gov</u> and demonstrate financial need.

Required Documents

- A copy of your (SAR) Student Aid Report that displays your (EFC) Expected Family Contribution. You will receive this after completing the (FAFSA) Free application for Federal Student Aid at www.fafsa.ed.gov
- Provide your schedule for the semester you are requesting a scholarship.
- A current transcript or grade report from your most recent semester/term(s).
- Copy of your most recent financial aid notification from your school.
- Anticipated tuition for the semester that you are applying.
- Self-Description letter; A brief letter updating us about you.

Application Submission & Deadline

- Photo copy materials submitted to keep for your records.
- Assemble all required documents in a 9 x 12 envelope.
- Mail to: The Scholarship Foundation of St. Joseph County, Inc., 3515 N. Main St., Suite C, Mishawaka, IN 46545
- Scholarship Deadline for Fall Semester 2018 July 15, 2018
- Scholarship Deadline for Spring Semester 2019 November 15, 2018
- Scholarship Deadline for Summer Semester 2019 April 15, 2019



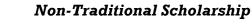
OF ST. JOSEPH COUNTY, INC.

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RENEWAL Applicant Information

Name					
Last	First		Middle		
Applicant Mailing Address					
City	Zip	County			
Home Phone	Cell Phon	e		-	
E-mail address		Birth Da	ate		
J.S. CitizenYesNo Marital Status		Number of Dependents you support			
How are they related to you (children, spouse,	parents, etc.)				
Are you EmployedYesNo	Full time	Part- time	Hours per week		
Name of Your Employer					
Veteran of Armed ForcesYesNo	Branch		Discharge Date		
Currently serving on active dutyYes	No If yes, ex	-			
School attending or will be attending					
Degree, certificate or course of study you wil	l be pursuing				
Number of completed credit hours			-		
Enrollment StatusFull timePart- tir	neAnti	cipated Credit	Hours per Semester		
Expected Completion Date					
Did you include your most recent transcript o	r grade report?	_YesNo			
Provide your schedule for the semester you	are requesting a sch	olarship.			
Reapplying for Fall Semester 2018 – July	15, 2018 deadline				
Reapplying for Spring Semester 2019 – N	lovember 15, 2018 c	leadline			
Reapplying for Summer Semester 2019 -	- April 15, 2019 dead	lline			





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Financial Information

Required Document: A copy of your (SAR) Student Aid Report that displa	ays your	(EFC) Estin	nated Family Contribution	n.
Include a copy with this application. (See page 1)				
What is your anticipated tuition for the semester you are applying?			_	
Have your received a financial aid notification letter from your school? _	Yes	No	If yes, please include a	сору.
Are you or will you receive tuition assistance or reimbursement from you	ur emplo	oyer?	YesNo	
Are you or will you receive tuition assistance or reimbursement from the	e VA?	Yes	No	
List other scholarships and/or grants you will be receiving.				
Name of scholarship/grant		Amount		
Name of scholarship/grant		Amount		
Name of scholarship/grant		Amount		
Self-Description				
Please provide a brief summary updating us on your situation at this time	ne.			
Agreement				
 The Scholarship Foundation uses name, images, voice or video recommunications to the community and on our website. Do you a video recorded image?YesNo 		-		or
 I certify that all the information provided in this application is co knowledge. 	omplete a	and accura	ite to the best of my	
Signature of Applicant		Date		