



AHMA-PSW FOUNDATION 2019 DAN GRADY MEMORIAL SCHOLARSHIP

Deadline - Friday, March 15, 2019

Dear Applicant –

This is your checklist for the Dan Grady Memorial Scholarship application process. Please follow all instructions carefully. Applications may be submitted electronically to info@ahma-psw.org or a hard copy can be mailed to:

AHMA-PSW Foundation PO Box 226969 Los Angeles, CA 90022.

The deadline for the application is **March, 15, 2019**.

- **Dan Grady Memorial Scholarship Application Form (5 pages)**

Please note that if you are a High School Senior, Section B on Page 5 must be completed and submitted to AHMA-PSW Foundation by a School Official

- **Certification of Residence Form**

- **High School or College Transcripts**

Unofficial Transcripts acceptable for either High School or College. If there is a break in your school attendance, please explain reason on a separate sheet. Any application submitted without transcripts will not be accepted

- **College Students:** *If your current transcript shows only 1 quarter / semester of grades, you are required to send high school transcripts in addition to your current College transcripts*

- **Three (3) Recommendations**

Recommendation forms must be submitted separate from your application by the person who is making the recommendation. Recommendations can be obtained from teachers, employers, youth group leaders, etc. Recommendations are due by Application Deadline date March 15, 2019

Please direct all inquiries regarding the Dan Grady Memorial Scholarship to AHMA-PSW Foundation office at 866-698-2462 or email at info@ahma-psw.org

RETURN COMPLETED APPLICATION BY FRIDAY, MARCH 15, 2019

AHMA-PSW Foundation, PO Box 226969 Los Angeles, CA 90022 or email at info@ahma-psw.org

2019 DAN GRADY MEMORIAL SCHOLARSHIP INFORMATION

ELIGIBILITY

AHMA-PSW Foundation scholarships are awarded to residents and dependents of on-site employees of AHMA-PSW member properties.

Applicants must be at least 16 years of age and must be in college OR high school graduates OR high school seniors. Applicants must have applied to and be eligible for admission for Fall 2019 to the college indicated on the scholarship application. If you are selected as a scholarship winner, you will be required to send proof of college enrollment for Fall 2019. Applicants who are enrolling in a 4-year or community college, or vocational school are eligible.

SELECTION CRITERIA

The criteria used to select scholarship recipients include grades, individual achievements, school and community involvement, and financial need.

DESCRIPTION OF SCHOLARSHIPS

Individual scholarships are awarded based on merit and need, and there is no predetermined number of winners or individual scholarship amount that will be awarded. The exact number of scholarships and the total amount of money to be awarded in 2019 will be determined during the selection process, at the sole discretion of the Scholarship Committee.

PAYMENT OF SCHOLARSHIPS

All scholarships are made payable to the colleges or institutions where the recipients will attend during the 2018-2019 school year. Once awarded, recipients will need to submit enrollment verification from the Registrar's or Admissions Office. Please note that scholarship payments are not made to individuals only to educational institutions.

APPLICATION PROCEDURE

There are (4) essential parts to the application, and all must be received in order for the AHMA-PSW Foundation Scholarship Committee to consider an application. The **deadline** for completed applications is **Friday, March 15, 2019**. Please mail application to: AHMA-PSW Foundation, PO Box 226969, Los Angeles, CA 90022 or email to: info@ahma-psw.org The (4) essential parts of the application are:

1. Dan Grady Memorial Scholarship application
2. Certification of Residence Form
3. High School or College transcripts
4. (3) Letters of Recommendation

NOTIFICATION PROCEDURE

The Scholarship Selection Committee will meet during the month of April. All applicants will be notified of the outcome status of their application by April 30, 2019.

2019 DAN GRADY MEMORIAL SCHOLARSHIP INFORMATION

IMPORTANT DATES AND DEADLINES (MAY BE CHANGED BY COMMITTEE)

- November 15, 2018** Application forms available for download from AHMA-PSW website (ahma-psw.org)
- March 15, 2018** *FINAL DEADLINE* for all parts of the application, including Recommendations, for the 2019 Dan Grady Memorial Scholarship. Mail complete applications to: AHMA-PSW Foundation, PO Box 226969, Los Angeles, CA 90022 or email to info@ahma-psw.org
- April 30, 2019** All applicants will be notified of the outcome of their application status
- May 3, 2019** Awardees will be invited to attend 2019 AHMA-PSW California Seminar
- May 20, 2019** 2019 AHMA-PSW California Seminar Scholarship Luncheon
- August 19, 2019** Enrollment verification from the Registrar's or Admission's office will need to be submitted to AHMA-PSW Foundation
- September 9, 2019** Scholarship checks, will be made payable to educational institution and mailed via U.S. mail directly to educational institute on behalf of the scholarship recipient to help pay for the recipient's 2019-2020 school costs.

Applicants – please remember to request grade transcripts from school and have your recommendation letters sent before the deadline of March 15, 2019.



2019 DAN GRADY MEMORIAL SCHOLARSHIP APPLICATION

Application Deadline: March 15, 2019

Please indicate which status applies to you:

- High school senior who has applied to a college or trade school
- High school graduate who has applied to a college or trade school
- Currently enrolled in a college or trade school

Last Name	First	MI
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Address	City	State	Zip Code
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(_____) _____	(_____) _____	____/____/____
Home Phone #	Cell Phone #	Date of Birth

Email Address

Please indicate which type of scholarship you are applying for:

- Academic (educational pursuit leading to a Bachelor's degree or higher)
- Vocational (in preparation for a trade, such as; auto mechanics or dental assisting)

Name of School Currently or Last Attended	Expected Graduation Date
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College you will attend in Fall 2019	Major
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Trade/Vocational School you will attend	Goal	Length of Program
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Estimated Annual Tuition	Other Estimated Costs (books, materials, etc.)
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Applicant Name: _____

Applicant Email: _____

Autobiographical questions

Please answer the following in brief, complete sentences:

1) Have you ever received an AHMA scholarship? If yes, how did the scholarship help you?

2) In your own words, describe your goals for the next few years:

Applicant Name: _____

Applicant Email: _____

Please answer the following in brief, complete sentences.

3) Please describe your most outstanding accomplishments or activities, and those which have been particularly meaningful to you:

4) If awarded, how would this scholarship assist you in pursuing your educational goal?

Applicant Name: _____

Applicant Email: _____

*If you have indicated that you are currently in college or have completed some college coursework, please fill out **SECTION A** below and return it with your application packet.*

*If you have indicated that you are a high school senior, please write your name at the top of this form and ask a school official fill out **SECTION B** below and mail it directly back to AHMA-PSW PO Box 226969 Los Angeles, CA 90022.*

Section A

Note: This section is to be completed by the applicant for

Students who have been or are Currently enrolled in college:

Has any of your college coursework been online?

- Yes
- No

If so, what percentage of your classes have been online?

- Less than 10%
- 10 – 25%
- 25 – 50%
- 50 – 100%

Section B

Note: This section is to be completed by a school official for

High School Seniors Only:

Current GPA (Cumulative)

Signature of School Official

Print Name of School Official

School Name

School Phone Number



2019 DAN GRADY MEMORIAL SCHOLARSHIP APPLICATION
CERTIFICATE OF RESIDENCE

Applicants: please give this form to your Resident Manager

To be eligible for an AHMA-PSW Scholarship, the applicant **must be a current resident** of an affordable housing complex which is currently a member of AHMA-PSW. Applicants: to certify your status, please have your Resident Manager complete this form.

Applicant's Name

If you are an on-site employee and/or dependent please have Supervisor sign the certificate of residence.

I hereby certify that the above-named applicant is a resident of:

Site Name

Govt. Subsidy Number

Site Address

City

State

Zip Code

This complex is managed by: _____
(Name of Management Company)

The applicant has lived at this site for: _____
(Number of years/months)

Signature of Resident Manager:

Signature

Print Name

Date

Email

(_____) _____
Telephone

Please direct all inquiries regarding the Dan Grady Memorial Scholarship Program to the AHMA-PSW office at 866-698-2462 or email info@ahma-psw.org



2019 DAN GRADY MEMORIAL SCHOLARSHIP APPLICATION RECOMMENDATION FORM (CONFIDENTIAL)

Note: This is a two-page form

Name of Applicant: _____

Name of Person Providing Referral: _____

Address of Person Providing Referral:

Email of Person Providing Referral:

Please check the most appropriate response for the applicant you are referring. Please consider each item independently from the others listed.

	Poor	Fair	Average	Good	Excellent
Dependability.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Honesty.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Perseverance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cognitive Aptitude.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conscientiousness.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1) How long have you known the applicant? _____

2) What is your relationship to the applicant? _____

Applicant Name: _____

Applicant Email: _____

Please add your personal comments and/ or endorsements of the applicant:

Signature

Printed Name

Date



2019 Dan Grady Memorial Scholarship

SCHOOL OFFICIALS: Please **DO NOT** return this form to the applicant. Please email to: info@aham-psw.org

or mail to:

PO Box 226969

Los Angeles, CA 90022

PLEASE RETURN FORM NO LATER THAN March 15, 2019



2018 DAN GRADY MEMORIAL SCHOLARSHIP APPLICATION
RECOMMENDATION FORM (CONFIDENTIAL)

Note: This is a two-page form

Name of Applicant: _____

Name of Person Providing Referral: _____

Address of Person Providing Referral:

Email of Person Providing Referral:

Please check the most appropriate response for the applicant you are referring. Please consider each item independently from the others listed.

	Poor	Fair	Average	Good	Excellent
Dependability.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Honesty.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Perseverance.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cognitive Aptitude.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conscientiousness.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3) How long have you known the applicant? _____

4) What is your relationship to the applicant? _____

Applicant Name: _____

Applicant Email: _____

Please add your personal comments and/ or endorsements of the applicant:

Signature

Printed Name

Date



2019 Dan Grady Memorial Scholarship

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2019 DAN GRADY MEMORIAL SCHOLARSHIP APPLICATION
RECOMMENDATION FORM (CONFIDENTIAL)

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Cognitive Aptitude.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conscientiousness.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5) How long have you known the applicant? _____

6) What is your relationship to the applicant? _____

Applicant Name: _____

Applicant Email: _____

Please add your personal comments and/ or endorsements of the applicant:

Signature

Printed Name

Date



2019 Dan Grady Memorial Scholarship

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