

# NEW FUTURES

An Initiative of the Allen Gould Youth and Family Learning Association\*

## Guidelines for Applicants

These scholarships will finance two kinds of scholars:

- Students who are applying to non-college/post-secondary programs. Primary consideration will be given to these applicants.

The scholarships will finance 90% of the non-financed balance up to a total of \$12,000 for tuition and other documented expenses for program attendance.

- Students who are applying to college:

The scholarship will finance up to \$1,500 per full-time semester, and up to a total of \$12,000 for tuition and other documented expenses for college attendance if needed after other financial aid is applied. (Funding for part-time attendance will be prorated based on number of credits being taken.)

Priority will be given to the first category of applicants.

The scholarships are intended for students pursuing postsecondary education. All candidates must be nominated by a participating community-based organization (CBO) with which the candidate has had a minimum six-month relationship.

The considerations for an award of scholarship are listed below:

**Character and Performance:** Many of the applicants for these scholarships will not always have had smooth sailing in terms of academic performance. What we are looking for is evidence of commitment, discipline, and a track record of performance, particularly in the last two years immediately preceding application. This may be shown in terms of performance in obtaining a GED or high school degree, employment, extra curricular activities, church, community service or other areas.

**Community-Based Organization (CBO):** The applicant must have and agree to maintain regular contact and involvement with their sponsoring community-based organization and mentor during their college or postsecondary education. Each New Futures scholar must sign an agreement that outlines the specific contact/involvement responsibilities with the community-based organization.

**Financial Status:** These scholarships are intended for students who clearly do not have the resources to finance their education without substantial financial support. Students must also apply for all other forms of financial aid for which he or she may be eligible (Pell Grants, DC LEAP, DC TAG, DC CAP, etc.).

The applications will be submitted to a Selection Committee that will review them and then call potentially qualified applicants for an interview. The interview will focus on the applicant's experience and plans for future education. The scholarships will be awarded shortly after the interview. Funds will be disbursed via the CBOs to the educational institutions at the appropriate times.

CBOs are to submit 6 copies of all completed applications to New Futures, 1965 Biltmore Street, NW, Washington, DC 20009 by **October 15** (for fall submissions) and by **April 7** (for spring submissions). All applications should be complete and include the following supplemental materials:

- **Current High School transcript or GED diploma and test scores (If the student is already enrolled in post-secondary education, a current cumulative transcript must be included.)**
- **Two Letters of Recommendation (Should be written specific to the applicant and should not be from family members. Suggested sources: teacher, employer, coach, clergy member, mentor.)**
- **Personal Essay**
- **Financial Plan (use the template attached)**
- **Financial Aid Documentation (FAFSA/SAR report, DC OneApp receipt, etc.) as indicated in the completed checklist in Part 6.**

**- ONLY STUDENTS WITH FULLY COMPLETED APPLICATIONS WILL BE CONSIDERED -**

\* Allen Gould Youth and Family Learning Association, Inc., a District of Columbia nonprofit corporation doing business as New Futures (hereinafter "New Futures")

**NEW FUTURES SCHOLARSHIP APPLICATION**

**Part 1. Applicant & Mentor Information**

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (Apt)

\_\_\_\_\_  
(City) (State) (Zip)

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Cell Phone (if applicable): (\_\_\_\_) \_\_\_\_\_ Race (for tracking purposes only): \_\_\_\_\_

Credential:  High School Diploma; Name of School: \_\_\_\_\_

GED / EDP; Name of Program: \_\_\_\_\_

Date of Birth (m/d/y): \_\_\_\_\_ Place of Birth (state or country): \_\_\_\_\_

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**All applicants are required to have a mentor and maintain regular contact with him or her throughout the course of their postsecondary study. Please provide his or her information.**

Nominating Organization: \_\_\_\_\_

Mentor Name: \_\_\_\_\_  
(Prefix) (First) (Last)

Direct telephone or extension: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

How long have you been with this community organization? (months/years) \_\_\_\_\_

How long have you worked with this mentor? (months/years) \_\_\_\_\_

**Mentor/Mentee Relationship:** In the space below, please write a brief description of the role that your mentor plays in your life, the kinds of activities that you do together, and the hours per week you spend together.

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

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**Part 2. Parent/Guardian & Family Information**

Parent/Guardian Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Home address: \_\_\_\_\_  
(Street) (Apt)

\_\_\_\_\_  
(City) (State) (Zip)

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Work Telephone: (\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_

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Secondary Contact Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street) (Apt)

\_\_\_\_\_  
(City) (State) (Zip)

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Work Telephone: (\_\_\_\_) \_\_\_\_\_

Employer: \_\_\_\_\_

**Financial Information:** Please enter the names of those who support you financially, their relationship to you, and their annual income (list yourself if you work). Below each person, please list the names and ages of their dependents.

Name:	_____	_____	_____
Relationship:	_____	_____	_____
Income:	\$ _____	\$ _____	\$ _____
Dependent/age:	_____	_____	_____
Dependent/age:	_____	_____	_____
Dependent/age:	_____	_____	_____

If you do not live with a parent, please explain your current living situation and if you are responsible for a spouse and/or children (please list the names and ages of your dependents below):

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

### Part 3. Essay, Community Participation, Awards, Employment & Financial Plan

**Essay:** On a separate sheet of paper, please prepare an essay that explains your educational, personal, and career objectives. Include a short personal history describing the significant events that have lead up to this point in your life (1 page maximum).

List extra-curricular, community service and other activities in which you have been actively involved: \_\_\_\_\_

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

List any academic, community service or other awards, certificates or honors you have received: \_\_\_\_\_

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

Current Employment, employer, type of work, how many hours a week: \_\_\_\_\_

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

**Financial Plan:** List the names of educational institutions you have applied to (or will apply to), the expected start date, and your area of study. Using the attached Financial Table, list tuition and other costs associated with attending the educational institution(s) you plan to attend, as well as how you plan to finance these costs. Please be specific and include both short and long term costs by using the template on the following page. More than one template must be submitted if the programs you are applying to vary substantially in cost. **Note: Students must apply for all forms of financial aid for which they are eligible. If not eligible for aid, an explanation must be provided.**

Institution Name:	_____	_____	_____
Start Date:	_____	_____	_____
Area of Study:	_____	_____	_____

**Financial Table – To Include Total Cost of Completing Program**

Name: \_\_\_\_\_ Community Organization: \_\_\_\_\_

College/School: \_\_\_\_\_ Program / Major: \_\_\_\_\_

Program Length (if pursued full-time):  1-year  2-year  4-year  Other: \_\_\_\_\_

Attendance Plan:  Full-Time  Part-Time; \_\_\_\_\_ credits per semester

EXPENSES PER SEMESTER (FULL COST; DO NOT REDUCE FOR AID WHICH MAY APPLY)		# SEMESTERS TO COMPLETE PROGRAM	TOTAL COST FOR PROGRAM
<b>School/Program Expenses</b>			
College Tuition (or cost of vocational program)	\$	X	= \$
Room and Board (if out-of-town attendance)	\$	X	= \$
School Fees (if not included in Tuition above)	\$	X	= \$
Other: _____	\$	X	= \$
Other: _____	\$	X	= \$
<b>Other Expenses</b>			
Books/Supplies	\$	X	= \$
Transportation	\$	X	= \$
Other: _____	\$	X	= \$
<b>ONE TIME EXPENSES</b>			
Computer			= \$
Other: _____			= \$
<b>TOTAL EXPENSES</b>			= \$

FINANCIAL AID/CONTRIBUTION PER SEMESTER*		# Semesters	Total
FAFSA: Pell Grant	\$	X	= \$
SEOG	\$	X	= \$
DC OneApp: DC LEAP	\$	X	= \$
DC TAG	\$	X	= \$
DC CAP (DC High School Seniors)	\$	X	= \$
Other: _____	\$	X	= \$
Other: _____	\$	X	= \$
Family Contribution	\$	X	= \$

*Indicate if it is a one-time contribution by writing "1" for # Semesters.*

*If no financial aid, explanation <u>must be provided</u> in Section 6.	<b>TOTAL FINANCIAL AID</b>	= \$
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<b>BALANCE (Total Expenses – Total Financial Aid)</b>	= \$
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#### Part 4. Expectations and Responsibilities of the Scholar

**Maintaining a relationship with the CBO:** It is required that each scholar have substantive contact with his or her mentor at least six times per year, to review the scholar's progress and to discuss any concerns or issues the scholar may have. It is hoped that at least one of these meetings be conducted face-to-face each year.

**Maintaining a relationship with the college financial aid office:** It is expected that the scholar will proactively find out all that is required of him or her to receive any available government financial aid each semester.

**Withdrawing scholarship funds:** In order to receive payment for education-related expenses, scholars must submit invoices and transcripts in a timely manner to provide their sponsoring organization with sufficient time to process requests. Scholars should not assume that their sponsoring organization can process check requests more quickly if there is little time before semester payment deadlines.

**Maintaining attendance:** Scholars must begin their programs within one year of receiving their scholarship and must maintain attendance. If a scholar takes time off from studying for more than 2 consecutive semesters (one year), their scholarship may be terminated. If special circumstances exist, scholarship continuance will be considered if a letter of explanation is received from the sponsoring organization. To be considered to be actively attending school, a student must be taking at least 2 classes in a given semester.

**Maintaining good grades:** Should scholars receive semester grades with less than a 2.0 grade point average, he or she will be considered to be on scholastic probation for one semester. If the scholar fails to achieve a 2.0 GPA in the subsequent semester, New Futures and the sponsoring organization will terminate the scholarship. At the end of each semester, and at the end of a program, scholars must submit a copy of their cumulative transcript to the sponsoring organization.

I, \_\_\_\_\_, hereby certify that I fully understand the terms of the New Futures  
(print applicant name)

Scholarship and that the information provided in this application is truthful.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

I, \_\_\_\_\_, hereby certify that I support \_\_\_\_\_'s  
(print parent/guardian name) (print applicant name)

application for the New Futures Scholarship. I further certify that I understand the terms of the scholarship and that the information in this application is truthful.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

#### Part 5: Photo, Interview, and Copyright Release Form for New Futures Scholars

I hereby grant to New Futures, permission to interview me and use my biographical data and/or my likeness in a photograph or video in any and all of its publications and in any and all other media, including its Web site. I also grant New Futures the right to publish any of my writings that describe my experiences with New Futures. I grant New Futures these rights without any expectation of payment or other consideration. I understand and agree that these materials will become the property of New Futures and will not be returned. I irrevocably authorize New Futures to use any material described above for purposes of publicizing New Futures programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness, biographical information, or written materials appear.

I hereby hold harmless and release and forever discharge New Futures and its directors, officers, employees, benefactors, volunteers and agents from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other person acting on my behalf or on the behalf of my estate have or may have by reason of this authorization.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***If the person signing is less than 18 years of age, there must be consent by a parent or guardian, as follows:***

I certify that I am the parent or guardian of \_\_\_\_\_,  
named above, and do hereby give my consent without reservation to the foregoing on behalf of this person.

Signature of parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Part 6. Financial Aid Checklist**

Federal Financial Aid:

- I have filed my FAFSA form and have attached a copy of my SAR report (or the FAFSA form if the SAR has not yet been received). Note: If the SAR report is not available at this time, please bring a copy of it to your New Futures interview.
  
- I am not eligible to apply for Federal Financial Aid for the following reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

District of Columbia Financial Aid:

- I am a DC resident and have filed my DC OneApp form. My OSSE receipt form is attached.
- I am not a DC resident.
- I am a DC resident but am not eligible for DC-based aid because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DC High School College Access Program (Note: citizenship not required):

- I am currently a high school senior at a DC public or charter school and have registered with the DC CAP office at my school and provided them with the required documentation.
- I am not currently a high school senior at a DC public or charter school.

**Commitment to pursue all available aid:**

- I commit to visit the financial aid office of my chosen school to ensure that all financial aid documents have been supplied, as required, and that all aid for which I may be eligible has been pursued.
- I commit to submit the required financial aid documents each year to ensure continued receipt of financial aid, as applicable.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_