

Grandview Terrace Scholarship Committee 14515 W Granite Valley Drive Sun City West, Arizona 85375

Grandview Terrace Scholarship Application

APPLICATION INFORMATION, PROCEDURES AND REQUIREMENTS SUMMARY

LETTER OF RECOMMENDATION

You should inform the Grandview Terrace supervisor who prepares a letter of recommendation for this application that scholarship applicants must have been employed a minimum of six months at Grandview Terrace and that recipients must continue to work a minimum of an average of 12 hours per week, in good standing, at a Sun Health Senior Living Community during the approved course of study. The letter must be dated and signed by the Grandview Terrace Supervisor.

HIGH SCHOOL AND COLLEGE TRANSCRIPTS

Please provide a copy of your high school and college transcripts as may be applicable.

IRS FORM W-9

Completed W-9 Form required.

INTERVIEW

Applicants will be contacted for an interview by Grandview Terrace Scholarship Committee members. The interview will be scheduled at a mutually agreeable time.

NOTIFICATION OF COMMITTEE DECISION

Applicants can expect to know if their application has been approved, including funding approved, within 15 days after submission of the application.

PAYMENTS TO SCHOOLS/INSTITUTIONS

Upon the approval of the application, the recipient will receive a check made payable to the school/institution based on the invoice submitted.

REIMBURSEMENT FOR BOOKS AND SUPPLIES

Upon approval of the application, the recipient may request reimbursement for required textbooks and supplies that have been purchased and are pertinent to the courses listed in the application. The recipient must present detailed receipts for reimbursement. If approved, a check will be made out to the recipient for the amount the committee deems to be acceptable.



CHECK LIST OF APPLICATION ITEMS

- 1. Completed Application
- 2. Two letters of recommendation addressed to the Grandview Scholarship Committee. One letter is to be dated and signed by applicant's current work supervisor.
- 3. An essay, that does not to exceed 250 words, which identifies goals and aspirations.
- 4. A transcript from High School [or copy of GED Certificate] and Technical or Trade School or College [if applicable].
- 5. A recent photo of yourself.
- 6. Two copies of itemized invoice for tuition and fees from the school/institution providing the intended course/program of study.
- 7. A copy of receipts for books and supplies, if applicable.
- 8. Completed IRS Form W-9
- 9. Supervisor's Employment Verification Form

APPLICATION, TRANSCRIPT, ESSAY AND PICTURE ARE TO BE SUBMITTED TO:

Grandview Terrace Scholarship Committee Attn: Bob Morton, New Applicant Coordinator 14515 W Granite Valley Drive, D642 Sun City West, Arizona 85375

Please reach out to Mr. Morton at 314-546-1079 or raghm@earthlink.net if you have any questions.

Thank you.



GRANDVIEW TERRACE SCHOLARSHIP APPLICATION

Please complete each item. [Please type or print.] If an item is not applicable, insert "**N/A**". Attach an additional sheet [Addendum], if necessary, to provide complete information. Place as many items as possible on the Addendum sheet, but you may use additional Addendum sheets, if necessary.

		Purpose of This A	Application			
I am requestin	g financial assistance	for the following ac	ademic or voca	tional training:		
Acader	mic Program	Degree/Certificate	Goal			
Vocational/Skills Training Certificate/Skills Goal						
		Applicant P	rofile			
Personal Infor	mation					
Name						
	Enter your Last Name, First Nam	ne, and Middle Name or Initia	il			
Address						
	No. & Street	Apt. No.	City	State	Zip Code	
Telephone		E-mail				
Recent Photog	graph of Yourself					



Educational Reco	ord		
Name & Address	of High Schoo	ol	
Graduated	Yes	Date	GPA
	No	Expected Date of Gradua	tion
	GED		
General Equivaler	ncy Diploma (GED) Certification – Date of Cer	tificate
Please list any Co Institution & Add	•	ege/College/University and Voc	cational Training Programs completed.
Degree or Certific	cate Earned: _		Date:
Institution(s) [not	: included abo	ove] in which I have been, or I ar	m currently enrolled.
Institution/Addre	SS		
Programs/Course	s/Credits		
See Adder	ndum		

Extra-Curricular/Community Service Activities

Please list any extra-curricular activities in which you have participated, including community services, school, work, church, offices held, leadership roles, honors and awards received.



See Addendum

Work Experience	
List any work experience, including part-time work a recent experience first.	and significant volunteer work. Enter your most
Current - Beginning on (Mo/Year)	Avg. Hrs. per Wk
Employer/Location	
Position/Duties	
Immediate Supervisor Name & Address	
Next Most Recent - Beginning on (Mo/Year)	Avg. Hrs. per Wk
Employer/Location	
Position/Duties	
Immediate Supervisor Name & Address	
Next Most Recent - Beginning on (Mo/Year)	Avg. Hrs. per Wk
Employer/Location	
Position/Duties	
Immediate Supervisor Name & Address	
Financial Data	
I have applied for other scholarships or financial aid.	Yes No
If Yes, please describe briefly:	
I am currently receiving a scholarship/financial aid.	Yes No



If Yes, please describe briefly:

See Addendum

Proposed Educational/Training Program

Institution Name				
Address				
	No. & Street	City	State	Zip Code
Credit Hours Comple	ted			
I will be Enrolling for	Credit Hours			
Degree and/or Certif	ication Goal			
I will be enrolling for	Fall Semester	Spring Semester	Summer	Session
Anticipated Expense	Tuition & Fees		Books & Supplies _	
		From Itemized Invoice		Estimated
Course, Credit, Cost [Detail			



Technical or Trade School (If N/A, please leave item blank and proceed to next item.)

Institution Name				
Address				
	No. & Street	City	State	Zip Code
Credit Hours Comple	ted			
I will be Enrolling for	Credit Hours			
Degree and/or Certif	ication Goal			
I will be enrolling for	Fall Semester	Spring Semester	Summer	Session
Anticipated Expense	Tuition & Fees		Books & Supplies _	
		From Itemized Invoice		Estimated
Course, Credit, Cost	Detail			
If more space is need	led, include on Addendu	m. Refer to required iter	nized invoice.	



Supporting Documentation and Interview

- Letters of Recommendation—Two letters of recommendation; one letter from your current work supervisor and one from someone, unrelated to you, who can describe your character and personal qualities that contribute to your work ethic and probable academic success.
- **Essay**—A typed essay [Letter of Intent], not to exceed 250 words, which identifies your goals and aspirations and how the coursework proposed in this application will assist in reaching your long-term goals.
- Transcripts—A copy of High School and College transcript, if applicable.
- IRS W-9 Form—Completed W-9 Form required.
- **Photograph**—A recent photograph.
- **Invoice**—Two copies of itemized invoice from institution providing instructional program.
- **Personal Interview**—A personal interview with members of the Scholarship Committee is required and will be scheduled at a mutually agreed time.
- Supervisor's Employment Verification Form

Verification and Authorizations

	Initial Here
I certify that the above information is complete and accurate.	
I authorize Grandview Terrace Human Resources to verify my employment information.	
I understand that an interview will be scheduled at a time which is mutually agreeable to me and to Grandview Terrace Scholarship Committee members.	
I agree to provide copies of final grades and/or notice of completion for the courses paid by the Grandview Terrace Scholarship Committee.	

Optional Authorizations [Publicity and Photo]	Initial Here
Note: Do not initial the items in this section if you don't want to publicize your participation in the	he program.
Optional—I authorize the Grandview Terrace Scholarship Committee to use my participation in the Grandview Terrace Scholarship Program in publications to promo contributions to the scholarship program and to encourage fellow employees to applish scholarships.	
Optional—I authorize the Grandview Terrace Scholarship Committee to use my picture publications to promote the Grandview Terrace Scholarship Program.	ire in

Applicant Name	
Applicant Signature	Date



Thank vou.

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Please reach out to Mr. Morton at 314-546-1079 or raghm@earthlink.net if you have any questions.

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FOR OFFICE USE ONLY				
Approved by Committee	Yes	No	Date	
Committee Member Signature				



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many items on an Addei	ndum page as space permit	ts. If necessary, prep	are a second Addendi	ım page.
ENTER SECTION TITLE:				
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Feel free to attach additional Addendum Sheets as necessary. Thank you.