



Carlson-Nau Key to Progress Scholarship Application

Criteria

The Hammond Urban Enterprise Association (HUEA) provides scholarships to college students. The scholarships are available for one academic year. Awards do not exceed \$2,000/year.

The HUEA funds the scholarship program and the HUEA Board of Directors determines the scholarships on a competitive basis. The HUEA reserves the right to revoke any scholarship subject to specified criteria.

Scholarship Criteria:

1. Applicants must have legal residence within the Enterprise Zone for at least one year.
2. Applications from non-zone residents will be accepted provided a parent, guardian, or applicant works at a Hammond Enterprise Zone Business for at least one year.
3. Applicant must have at least a 2.5/4.0 cumulative grade point average.
4. Applicant must be accepted to an accredited institution. Institutions included are: Universities, Colleges, Junior Colleges, Vocational and Technical Schools. (All institutions must have certification)
5. Applicant must in need of financial assistance. This will be verified by the Financial Aid Form (FAF) and or comparable documentation.
6. Applicant must agree to complete 100 hours of volunteer service as directed by the HUEA.
7. The successful applicant, who has achieved a minimum cumulative grade point average of 2.5/4.0 and is in good standing with the institution, may reapply subject to the above criteria.
8. If a student falls below a 2.5/4.0 cumulative GPA, the student is disqualified from the program, however the student may reapply after their cumulative is above a 2.5/4.0.
9. Current scholars must fill out the current scholar application instead of the complete scholarship application.
10. If the applicant applied to the program previously and went on sabbatical for more than one semester, the applicant must complete the entire scholarship application.
11. The HUEA Board of Directors votes on Scholarships in August and December. Applications are due one month before the Board's decision is made.

Documentation:

Applicant must submit:

1. Proof of residency (Copy of Driver's License, Utility Bill, etc.)
2. Proof of employment (Pay Stub, Letter from Employer, etc.)
3. Most current transcripts
4. Copy of recognized financial need analysis
5. Three letters of recommendation other than family
6. A recent photograph of the applicant



Urban Enterprise Association

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Applicant Information

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____ Phone: _____

Date of Birth: _____ Place of Birth: _____

Sex: MALE FEMALE Citizenship: _____

Name of High School: _____

Class Rank: _____ Grade Point Average (xx/4.0): _____

Have you previously participated in the Carlson-Nau program? YES NO

List any co-curricular activities that you have:

Please list other scholarships and awards you received:

Do you plan to work at school? If yes, explain. Include place of work, position, & salary.



Urban Enterprise Association

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Family Information

Father's Name: _____

Address: _____

City: _____ State: _____

Address: _____

City: _____ State: _____

Place of Employment: _____

Position: _____ Approximate Salary: _____

Mother's Name: _____

Address: _____

City: _____ State: _____

Address: _____

City: _____ State: _____

Place of Employment: _____

Position: _____ Approximate Salary: _____

List of family member and ages living at home:



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Accredited Institution Information

Name of College of University: _____

If not a College or University, specify: _____

For the above mentioned school, have you been accepted? _____

What degree are you pursuing? _____

Are you currently enrolled in school? YES NO

Year in School: Freshman Sophomore Junior Senior Other: _____

Please indicate the number of hours you scheduled: _____

Name of Financial Aid Officer: _____

Address of Financial Aid Office: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

School's financial aid office must fill out this information.

As an alternative, the applicant may submit notice of financial need that FAFSA sends to the school.

Name of Institution: _____

Cost for the academic year: _____

Aid awarded: _____

Family Contribution: _____

Financial Need: _____

Signature: _____ Date: _____

(Financial Aid Officer)



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Additional Information

Please list any other information that may help to further explain your need for this scholarship. Attach additional page if necessary.

Application Checklist:

1. Application
2. Proof of residency (Copy of Driver’s License, Utility Bill, etc.)
3. Proof of employment (Pay Stub, Letter from Employer, etc.)
4. Most current transcripts
5. Copy of recognized financial need analysis
6. Three letters of recommendation other than family
7. A recent photograph of the applicant

To the best of my knowledge, the information submitted is true and accurate.

Signature of Applicant

Name

Date

Signature of Parent or Guardian

Name

Date

**SEND COMPLETED APPLICATION TO:
Hammond Urban Enterprise Association
649 Conkey Street, Suite 1
Hammond, IN 46324**



Carlson-Nau Key to Progress Scholarship Application

Letter of Recommendation

DIRECTIONS: Comments should be requested from any agency, organization or individual (excluding family) that can articulate the applicant's qualifications for the scholarship. The recommendation should discuss the applicant's unique talents and characteristics. Comments on this form will be used by the Hammond Urban Enterprise Association to assess the credentials of the applicant. PLEASE TYPE if possible.

COMMENTS :(from the public, organizations or agencies)

Name and Title of Person Submitting the Recommendation (please print):

Name	Title	Date
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Signature (a stamped signature is UNACCEPTABLE)

Name	Title	Date
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