



Adult Learners, Inc. Scholarship Application

Instructions for Completing this Need-Based Application

Purpose of the Adult Learners, Inc. (ALI) Scholarship

The purpose of the ALI Scholarship is to provide financial and non-financial support for adult learners in the form of tuition and/or funding to address educational or employment barriers. Scholarship eligibility is need-based for adults who are U.S. citizens, 18 years of age or older and living in the 12 Indiana counties of Benton, Carroll, Cass, Clinton, Fountain, Howard, Miami, Montgomery, Tipton, Tippecanoe, Warren and White are eligible to apply.

ALI can offer support funding to help the scholarship applicant address current educational barriers while seeking better long-term career and work opportunities. See page #2 of the scholarship application under the Interests Section for a list of potential uses of scholarship funds. Scholarships/funding to be awarded quarterly.

Application Requirements

Please use this list to verify that you have included all the information requested.

- Application is fully complete and legible with NO blanks.
- Signed and dated application attesting that everything submitted is accurate and true.
- My statement of goals is complete and is 500 words or less.
- Three references (only one of the three references required may be from a relative/friend).
- I have **NOT** included a cover letter, resume or any pictures.

An ALI Scholarship award requires an interview, willingness to respond to questions related to the scholarship application, and ALI Board approval. Personal identity is confidential. No scholarship recipient is directly given financial support; funds are sent to the product/service provider.

How to Apply

Submit a complete ALI Scholarship application to:

Adult Learners, Inc.

839 Main Street

Suite 100

Lafayette, IN 47901

or by email to: adultlearnersinc@gmail.com

Quarterly Application Deadlines: March 31, June 30, September 30, December 31

All scholarship applications will be reviewed by the end of the quarter the applications were received.

You will be notified of the final decisions after the awards are determined. Your application may be approved as written, approved with modifications, approved with contingencies or denied.

Any questions may be emailed to adultlearnersinc@gmail.com.

Adult Learners Incorporated Scholarship Application

Date Received: _____ (For Office Use Only)

First Name Middle Name Last Name Date of Birth

Street Address City State and Zip Code

() _____ () _____ () _____
Home Phone Cell Phone Work Phone

Email: _____ US Citizen (Y or N) _____ I use Facebook Twitter

Are you getting assistance from any other sources? (Y or N) _____

If so, please list: _____

Number of Adults Living in Your Household _____ Number of Children Living in Your Household _____

Annual Income (Please include Soc Sec Disability, Child Support, Other Scholarships Received and Work Income of **All** Adults) _____

How did you learn about the Adult Learners, Inc. Scholarship? _____

Educational Status: Highest Grade Completed _____ Have GED or HSE (if applicable) _____ I am in school now (Y or N) _____

If currently in school, list where _____

Employment Status: Employed Part Time Employed Unemployed Homemaker

(Circle all that apply)

Other _____

Explain

Employment History (last 10 years):

Employer Job Title Dates and Years of Employment Reason for Separation

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Interests:

Earning my High School Equivalency Diploma Making a Career Decision

Study Skills Training and Instruction Getting an Associate's Degree

Getting a Certification/License for Employment Other: _____

Support Services (housing, transportation, supplies)

Challenges: (Check all that apply. You will not be disqualified for checking any box or any combination of boxes.)

Legal Issues A Disability

Child Care Issues Housing Problems

Medical/Dental Problems Substance Abuse or Addiction Issue

Transportation Education

My Current Work Schedule Work Experience

Description of your Goals: In 500 words or less, describe your goals and how you hope to reach them relating them to this scholarship's purpose. Along with your educational goals, include information on the current obstacles you face in completing/reaching those goals. Make sure your description is well thought-out and clearly written. Check for accurate grammar, spelling and punctuation. You may begin your essay at the bottom of this page and feel free to add another page, if necessary.

References: Please list the names, phone numbers and relationship of **three** people who know you and can provide a reference. Please note: Only one of the three references required may be from a relative/friend.

Full Name	Current Phone Number	Relationship to Applicant
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I attest to the best of my knowledge that all the information I have submitted is true and accurate. I realize that if any inaccuracies are found, I will be disqualified for this scholarship.

Signature

Date

Goals Essay: