



## RESIDENT SCHOLARSHIP APPLICATION: GENERAL INFORMATION

1. All applications must be **received by Friday, March 3, 2023 at 5:00 PM** (postmarked no later than **Wednesday, March 1, 2023**) by the **AAHA Scholarship Fund, Inc.**
2. All applicants must meet the following criteria:
  - A. Have a minimum of a **“B” average or 3.5 GPA** in high school or college.
  - B. Must be accepted or currently enrolled at school, college, or university accredited vocational or technical.
  - C. Applicant must be enrolled as a full-time student (12 credit hours minimum) during the Fall and Spring semesters of the academic year.
    - Please notify the AAHA Scholarship Fund, Inc. of any special circumstances that may prevent you from meeting this eligibility requirement.
  - D. Must be listed as a resident on the current tenant certification at a member complex, lives in an income restricted income unit and have lived at that complex for at least six months, the only exception would be a property that is less than six months old.
  - E. Must be in good standing with both the management company and the property in which you reside.
  - F. Property Manager or Divisional Manager of an AAHA member property. Letter must be attached from Management Company stating they are employed with the company.
  - G. Any member of a Property Manager or Divisional Manager household, is eligible to apply.
3. The scholarship awards will be made to qualified tenants or resident family members who meet the above criteria, living at the apartment complexes that are a member of the Alabama Affordable Housing Association.

The scholarship awards will be made to qualified Regional Managers/Division Managers or Site Managers/Property Managers or Maintenance Personnel. A letter from the Management Company must be attached stating they are employed and the length of employment with the company.

4. The Scholarship awards will be made to children of Regional Managers/Division Managers or Site Managers/Property Managers or Maintenance Personnel.
5. Scholarship awards may also be made to a person from the Home Office of a management company. Must have been employed minimum one year and be in good standing. If awarded, continued employment with Management Company required.

Scholarship awards will also be open to dependent children of an employee from Home Office of a management company. Must have been employed minimum one year and be in good standing. If awarded, continued employment with Management Company required.

6. Funds are to be utilized beginning August of 2023 and will remain in effect for the duration of the 2023-2024 school year. If awarded, the scholarship recipient will receive \$1,000 for the first semester. Provided that the student maintains the qualifications of eligibility, they will be awarded another \$1,000 for the second semester. Therefore, a total of \$2,000 will be awarded for the entire school year. Prior to the start of each semester, the funds will be sent directly to the college in which the recipient attends.
7. The applications will be judged on academic achievements, school attendance, work performance, career goals, extra-curricular school activities, community activities and other achievements. Extenuating circumstances and need may also be considered. Success in core curriculum courses, in particular will be considered in evaluating academic achievements. The AAHA Scholarship Committee will select awardees from all applicants in its sole and absolute discretion. The AAHA Scholarship Committee or its designee may choose to interview the applicants.
8. The scholarship recipients and their respective manager will be notified via email by May, 2023.
9. The scholarship will be administered by the institution attended by the recipient. Funds may be used for books and/or tuition for one year or longer, if approved by AAHA Scholarship Fund. Recipient's failure to continue required course of study as a full-time student or **maintain a "B" average (3.0 GPA)** will cause the unused portion of funds to revert back to the Scholarship Fund.
10. **If you have any questions, you may contact Arrice Fought, AAHA Executive Director:  
Email: [arrice@theaaha.org](mailto:arrice@theaaha.org) Phone: (205) 331-8668**

## AAHA Scholarship Instructions

1. Complete and sign the attached application form. Use extra sheets for responses if necessary.
2. You must provide an **official** certified copy of your high school or college transcript showing your courses completed, current courses enrolled in, and grades for each course, currently enrolled in, grades, and signature from registrar's office, or applicable governing office.
3. The following **MUST BE SUBMITTED WITH THE APPLICATION:**
  - A. Attach an essay, **typed in 300 words** or less describing any extraordinary circumstances or special factors that may affect your financial need.
  - B. Using the recommendation sheets attached: Obtain **three (3)** or more letters supporting the academic record, school attendance, character, work experience, achievements, and potential for education and career advancement of the applicant.
    - **(1)** Letters from a teacher of an academic class that the applicant is currently enrolled in (if applicable).
    - **(1)** Letter may be from a school official such as a principal or counselor.
    - **(1)** Letter may be from ministers, coaches, employers, past teachers, or any person with significant knowledge of the applicant.

**(If you are presently in college, letters of reference must be from professors, organizational leaders, pastors, etc.) The letters should NOT be from any person related by blood or marriage to the applicant.**
  - C. Attach certification from apartment manager concerning your membership in household along with a copy of the current tenant income certification showing membership in household. **(Certification form is attached and must be signed by apartment manager.)** Also, attach a letter from the Management Company and from the Property you reside that states you are in good standing.
  - D. **Attach a 5 X 7 Current photograph (taken within the last three months).** This can be emailed or mailed. (This will be used only for promotional purposes if awarded scholarship). **\*\*Please be sure picture is taken in Sunday dress, NO SELFIES\*\*.**

Applications and other required documents must be received at the address below on or before **Friday, March 3, 2023, 5:00 p.m.** Central Time (or postmarked no later than, Wednesday, March 1, 2023). This application deadline is firm as to date and time. Please mail, or scan and email the **completed** application to:

**Regular Mailing Address:**  
AAHA Scholarship Fund, Inc.  
1105 Southview Ln Ste 103/#236  
Tuscaloosa, AL 35405

**Overnight Address:**  
AAHA Scholarship Fund, Inc.  
1503 Mallard Circle  
Tuscaloosa, AL 35405

**Alabama Affordable Housing Association  
Scholarship Application 2023**

Full Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Street Address

\_\_\_\_\_  
City County State Zip

Applicant's Home Phone: \_\_\_\_\_ Applicant's Cell Phone: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

Applicant's Social Security #: \_\_\_\_\_ Applicant's Date of Birth: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Parent's Cell: \_\_\_\_\_

Apartment Complex: \_\_\_\_\_

Management Company: \_\_\_\_\_

Manager's Name: \_\_\_\_\_

Manager's Cell Phone: \_\_\_\_\_

Manager's Office Phone: \_\_\_\_\_

Manager's Email Address: \_\_\_\_\_

Are you currently attending high school?  Yes Anticipated Graduation Date: \_\_\_\_\_

No Date You Graduated: \_\_\_\_\_

High School: \_\_\_\_\_  
Name City County

High School GPA (4.0 Scale): \_\_\_\_\_ ACT Composite Score: \_\_\_\_\_

If applicable: Vocational, Technical School or College/University:

\_\_\_\_\_  
Name City County

Undergraduate GPA (4.0 Scale): \_\_\_\_\_ (attach copy of transcript)

Expected Graduation Date: \_\_\_\_\_ Degree \_\_\_\_\_ Major: \_\_\_\_\_

**Counselor's Name and Contact information, including, Phone Number and Email Address:**

\_\_\_\_\_

**Do you currently have or expect to have any of the following:**

Scholarships: **YES / NO**      If yes please list all scholarships expected including:

How Much? Duration of Scholarship? \_\_\_\_\_  
\_\_\_\_\_

Government Grants: **YES / NO**      If yes how much? \_\_\_\_\_

Student Loans: **YES / NO**      If yes how much? \_\_\_\_\_

Any other sources of college funding? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT**

List all job employment in which you have received wages during the past 4 years (e.g. cashier, restaurant worker, receptionist, errand runner, maintenance work, etc.)

Position	Location	Dates Held

**AMBITIONS**

Have you already been accepted to college or university or vocational/technical school? **YES / NO**

If so, where? \_\_\_\_\_  
Name of College or University      City/State

**\*(If yes, attach copy of acceptance letter)**

Where do you plan to attend? \_\_\_\_\_

What is the average annual tuition cost of where you plan to attend? \_\_\_\_\_

When do you plan to graduate? \_\_\_\_\_

What kind of degree and career do you plan to pursue? \_\_\_\_\_  
\_\_\_\_\_



Alabama Affordable Housing Association

## STUDENT RECOMMENDATION #1

**TO BE COMPLETED BY APPLICANT:**

Name: \_\_\_\_\_

First

Last

Middle

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**TO BE COMPLETED BY PERSON RECOMMENDING APPLICANT:**

How long and in what capacity have you known the applicant?

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Please provide an assessment of the applicant's academic performance, personality, character, and conduct. Include in the statement an assessment of strengths, weaknesses, and challenges that the student has overcome. If addition space is needed, you may use a separate sheet of paper.

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

Print Name: \_\_\_\_\_ Position Held: \_\_\_\_\_

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

Employer's Address: \_\_\_\_\_

Mailing Address

City

State Zip

**\*Please seal this recommendation in an envelope and return to the applicant, to be included in their application materials.**



Alabama Affordable Housing Association

## STUDENT RECOMMENDATION #2

**TO BE COMPLETED BY APPLICANT:**

Name: \_\_\_\_\_

First

Last

Middle

\_\_\_\_\_

Student Signature

\_\_\_\_\_

Date

**TO BE COMPLETED BY PERSON RECOMMENDING APPLICANT:**

How long and in what capacity have you known the applicant?

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

Please provide an assessment of the applicant's academic performance, personality, character, and conduct. Include in the statement an assessment of strengths, weaknesses, and challenges that the student has overcome. If addition space is needed, you may use a separate sheet of paper.

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



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

Print Name: \_\_\_\_\_ Position Held: \_\_\_\_\_

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

Employer's Address: \_\_\_\_\_

Mailing Address

City

State Zip

**\*Please seal this recommendation in an envelope and return to the applicant, to be included in their application materials.**



Alabama Affordable Housing Association

## STUDENT RECOMMENDATION #3

**TO BE COMPLETED BY APPLICANT:**

Name: \_\_\_\_\_

First

Last

Middle

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**TO BE COMPLETED BY PERSON RECOMMENDING APPLICANT:**

How long and in what capacity have you known the applicant?

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Please provide an assessment of the applicant's academic performance, personality, character, and conduct. Include in the statement an assessment of strengths, weaknesses, and challenges that the student has overcome. If addition space is needed, you may use a separate sheet of paper.

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

Print Name: \_\_\_\_\_ Position Held: \_\_\_\_\_

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

Employer's Address: \_\_\_\_\_

Mailing Address

City

State Zip

**\*Please seal this recommendation in an envelope and return to the applicant, to be included in their application materials.**

### SCHOOL ACTIVITIES

List all school activities in which you have participated during the past 4 years (e.g. student government, music, sports, etc.) Indicate all special awards and honors. List all leadership positions and offices held. Check academic years during which you participated. If necessary, you may attach additional sheets; use the below format and please **DO NOT REPEAT ACTIVITIES**.

Activity	'19	'20	'21	Special Awards/ Honors	Leadership Positions Offices Held	'19	'20	'21
	- '20	- '21	- '22			- '20	- '21	- '22

### COMMUNITY AND VOLUNTEER SERVICES

List all community and volunteer activities in which you have participated without pay during the past 4 years (e.g. Red Cross, Big Brothers/Big Sisters, Youth Group, volunteer at nursing home, recycling project, fund raisers, etc.) Indicate all special awards and honors. List all leadership positions and offices held. Do not list any paid work. Check academic years during which you participated.

Activity	'19	'20	'21	Special Awards/ Honors	Leadership Positions Offices Held	'19	'20	'21
	- '20	- '21	- '22			- '20	- '21	- '22

## **FINANCIAL NEED**

Please **ATTACH** a **TYPED** a short essay in 300 words or less explaining how the AAHA Scholarship has provided an opportunity of financial assistance to help you attain your educational goals.

## **AUTHORIZATION & SIGNATURE**

By submitting this application, I authorize my high school or higher education institution to make available to the AAHA Scholarship Fund, Inc. ("The Scholarship Fund") and its agents, any and all information concerning my academic record and any other pertinent information. I certify that all of the information in this application is true and correct to the best of my knowledge and that I meet the eligibility requirements set forth in this Application Form. I further authorize the Scholarship Fund to disclose my name, address, and photograph in connection with promotional activities concerning the Scholarship Fund and to schools and colleges.

\_\_\_\_\_

Applicant Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Parent or Guardian's Signature (if under age 19)

\_\_\_\_\_

Date

**RESIDENCY CERTIFICATION**  
**(TO BE COMPLETED BY RESIDENT MANAGER)**

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

Apartment Complex: \_\_\_\_\_

Apartment Manager: \_\_\_\_\_

Manager's Cell Phone: \_\_\_\_\_

Head of Household on Tenant Certification: \_\_\_\_\_

The Applicant \_\_\_\_\_ is listed on the **attached tenant income certification.**

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title, Name of Complex

\_\_\_\_\_  
Management Company

**GOOD STANDING CERTIFICATION**  
**(TO BE COMPLETED BY RESIDENT MANAGER)**

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

Apartment Complex: \_\_\_\_\_

Apartment Manager: \_\_\_\_\_

Manager's Cell Phone: \_\_\_\_\_

Head of Household on Tenant Certification: \_\_\_\_\_

The Applicant \_\_\_\_\_ is currently in good standing.

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title, Name of Complex

\_\_\_\_\_  
Management Company