

## Program Description & Guidelines

The Atlanta Community Scholars Award (ACSA) is an initiative of the Atlanta Housing Authority (AHA); and the United Negro College Fund (UNCF) is the program's fiscal agent. As one of the nation's oldest and most successful education assistance organizations, UNCF is committed to increasing opportunities for minority students, and AHA strongly encourages lifelong learning as an integral component of its vision of building vibrant communities and encouraging individual self-sufficiency.

The purpose of ACSA is to provide scholarships to eligible AHA-assisted individuals in support of their post-secondary education options. Scholarships will be awarded without regard to race, religion, sex, color, national origin, disability, or familial status. All candidates for the scholarship must participate in the AHA scholarship application process and meet established eligibility criteria.

## Eligibility Criteria

The applicant must:

- ✓ Be a member of an AHA-assisted household.
- ✓ Be between the ages of 16 and 30.
- ✓ Be enrolled, accepted, or plan to attend an accredited two- or four-year college, university, or technical school, **OR** a college student currently enrolled in an accredited undergraduate program.
- ✓ Have attained a cumulative Grade Point Average (GPA) of 2.0 or better at the time of application submission. This does not apply to GED applicants. Additionally, recipients must remain in good standing with their chosen institution and maintain a minimum GPA of 2.5 or better thereafter.
- ✓ Demonstrate financial need as documented by the chosen institution.
- ✗ **Graduate level students are not eligible to apply.**

In addition:

- ✓ Scholarship applicants selected for award consideration will participate in a personal interview process with the ACSA Scholarship Selection Committee.
- ✓ Scholarships are subject to revocation by the Selection Committee for cause, including, but not limited to, non-compliance, performance, and lease violations.
- ✓ Scholarships are renewable annually for a total of four awards – provided that funds are available. Renewals require submission of an official college transcript, 40 hours of documented community service, and an interview with the Selection Committee. All other eligibility criteria requirements must also be met.

Upon completion, return application with all supporting documentation no later than Friday, March 9, 2018 to:

**Atlanta Housing Authority  
Community, Governmental, & External Affairs  
230 John Wesley Dobbs Avenue  
Atlanta, GA 30303**

## Required Documents to be Submitted

- Completed General Information Application - typed (using the application enclosed) **NOTE: This form can be completed electronically. Every effort should be made to submit a typed application.**
- Two letters of recommendation (selected from the following):
  1. **On letterhead:** One letter from an academic or civic source:
    - **Academic:** Principal, teacher, counselor, or other school official.
    - **Civic:** Employer, civic leader, pastor, community service official, etc.
  2. One letter from an adult (not a relative / 21 years or older) who can attest to the applicant's achievements, qualifications, and aptitude. Letters from relatives will not be accepted.
- **Official** high school transcript, GED certificate, or college transcript.
- Letter(s) of acceptance from chosen institution(s) - if received by application deadline.
- Copy of applicant's SAT or ACT scores (if applicable).

Omission of any of the required documents will render the application incomplete and ineligible for scholarship consideration.

## Additional Documents to be Submitted

If an applicant is selected to receive an ACSA award, applicant must also submit:

- Verification of unmet financial need from institution's Financial Aid Office.
- Copy of Federal Application Form for Student Aid (FAFSA).

## Information & Questions

Call (404) 817-7329

## Restrictions

AHA reserves the right to revoke any award for reasons including, but not limited to:

- Non-compliance with AHA's Work/Program Requirement.
- Candidate does not enroll for Fall 2018 semester classes.
- Candidate is not accepted by an educational institution.
- Application information is determined to be false.

## Application

Name: \_\_\_\_\_  
Last First MI

Last 4 digits of SSN only: \_\_\_\_\_ Gender:  Female /  Male

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (4 digit year)

Current Address: AHA Community (if applicable): \_\_\_\_\_

Number Street Apt. #

City State Zip Code

Cell Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Last 4 digits of SSN only: \_\_\_\_\_

Address: \_\_\_\_\_  
Number Street Apt. #

City State Zip Code Telephone #

Cell Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

## Education

**High School Senior**

High School Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Principal's Name: \_\_\_\_\_

Counselor's Name: \_\_\_\_\_

Date of Expected Graduation: \_\_/\_\_/\_\_\_\_ Current GPA: \_\_\_\_\_

College/University/Technical Institution w/ (City and State)	Acceptance Date (if received)
1.	
2.	
3.	
4.	

**Activities, Awards & Honors**

Please list all school activities in which you have participated during the **past four years** (e.g., student government, music, sports, etc), and note all special awards, recognitions, honors and offices held.

High School Activities	# of Years	Honors, Special Awards or Recognition	Offices Held (if any)
1.			
2.			
3.			
4.			

**Community Involvement**

Please list community service organizations, volunteer organizations or special projects you are now active with or have previously been active with during the past four years, including employment and internships, etc.

Organization	# of Years	Service, Volunteer Organizations, Special Projects, Employment, Internships, etc.	Offices/Positions Held (if any)
1.			
2.			
3.			
4.			

**Disclosure**

By signing this disclosure, I understand that I am granting AHA permission to disclose and discuss the contents of this application with UNCF staff and the ASCA Scholarship Selection Committee or third parties such as schools, colleges, universities, and references for the purposes of evaluating my application and eligibility for the ACSA scholarship.

I hereby certify that the information provided in this application is to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application.

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

(If under the age of 18)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This application form consists of three (3) pages. If you are missing any page(s) please contact AHA's Community, Governmental, and External Affairs Team at (404) 817-7329.