



Department of Housing & Family Services
Louisville Metro Community Action Partnership
810 Barret Avenue
Louisville, KY 40204
PHONE: 502.574.1157 • FAX: 502.574.1246
www.louisvilleky.gov

November 14, 2011

Dear Applicant:

Community Action Partnership (CAP), a division of Louisville Metro Department of Community Services and Revitalization, is seeking qualified candidates for our Education in Action College Scholarship Program.

CAP provides numerous programs and services which strive to improve the lives of Louisville residents. Once again this year we are thrilled to offer an educational opportunity. CAP will award scholarships up to \$2,500 per semester/quarter, \$5,000 maximum for the year (based on need) which will be made payable to the students' college of choice at a college or university in Louisville Metro to assist with tuition. Any remaining money from the student will be reviewed for use in subsequent semesters or refunded to CAP.

Copies of the student application and federal income guidelines are enclosed. Duplication of application is permissible. Applications may also be accessed at www.louisvilleky.gov/cap.

All candidates must meet the following criteria:

- Jefferson County resident
- Household gross income not to exceed 125% of federal income guidelines
- High School Diploma or GED
- 3.0 Cumulative Grade Point Average (GPA)
- Candidates may be contacted for personal interview
- Must be willing to engage with CAP's case managing services
- Must complete twenty (20) volunteer hours prior to applying

Candidates must submit the following documents (*incomplete application/packets will not be accepted*) by **close of business day on December 30, 2011** to be considered:

- Completed scholarship application
- Photo ID for applicant (or parent/guardian if applicant is under eighteen years of age)
- Copy of high school diploma or GED
- Most recent transcript – proof of 3.0 GPA
- Proof of household's gross income for previous month
- Copies of social security cards and birthdates for all household members
- 1000-word typed essay: What impact do you want to leave on your community as you pursue higher education?
- Proof of acceptance into a higher education institution in Louisville Metro
- A letter of recommendation from a teacher, counselor, clergy, or employer



Greg Fischer
Mayor
Louisville
Metro Council

(continued on next page)

Scholarship applications should be mailed or hand delivered to:

Louisville Metro Community Action Partnership
Attn: Joi E. Boyd
810 Barret Avenue, 3rd floor Receptionist area
Louisville, KY 40204

Scholarship recipients will be notified by mail no later than the week of January 9, 2012. If you have questions or need additional information, please contact Joi E. Boyd at 574-7301 or Joi.Boyd@louisvilleky.gov

Sincerely,

A handwritten signature in cursive script that reads "Teshanna Brown".

Teshanna Brown
Supervisor
Education, Training, and Employment Team

Enclosures

CAP's mission is "To eliminate poverty and its effects among the residents of Metro Louisville, Kentucky, one family at a time." The scholarship project is funded, in part, under a contract with the Cabinet for Health and Family Services with funds from the Community Services Block Grant Act of the U.S. Department of Health and Human Services.



Louisville Metro Department of Community Services and Revitalization
Community Action Partnership
2011 EDUCATION IN ACTION COLLEGE SCHOLARSHIP PROGRAM
APPLICATION

STUDENT INFORMATION		
Student Name		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address		GPA
City	State	Zip Code
Phone	Alternate Phone	Date of Birth: / /
PARENT/GUARDIAN INFORMATION (Only sign if applicant is under 18 years of age)		
Parent/Guardian Name		Phone Number
COLLEGE INFORMATION		
College Name		
Street Address		
City		
State	Zip Code	Phone Number
Major (If known)		
Have you been accepted to the college? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any additional financial aid? <input type="checkbox"/> Yes <input type="checkbox"/> No Amount: _____		
CHECK LIST – PLEASE REVIEW AND ATTACH THE FOLLOWING		
<input type="checkbox"/> Completed application <input type="checkbox"/> Photo ID for applicant (or parent/guardian if applicant is under eighteen years of age) <input type="checkbox"/> Proof of household's gross monthly income for previous month (tax returns accepted for self employed person only) <input type="checkbox"/> Proof of household size (copy of social security cards and birthdates for all household members) <input type="checkbox"/> Proof of High School Diploma or GED <input type="checkbox"/> Most recent transcript – proof of 3.0 GPA <input type="checkbox"/> 1000 word typed essay <input type="checkbox"/> One letter of recommendation from teacher, counselor, clergy, or employer <input type="checkbox"/> Proof of acceptance into a higher education institution in Louisville Metro <input type="checkbox"/> Willing to engage with CAP's case managing services <input type="checkbox"/> Proof of at least 20-hours of volunteer service		
SIGNATURE		
Student Signature		Date
Parent/Guardian Signature (if applicant is under 18 years)		Date
INCOME/HOUSEHOLD VERIFICATION (to be completed by CAP Staff)		
Household Size	Household Annual Income \$	Income Verification Used
Staff Signature		Date

Return application and supporting documentation by close of business day on December 30, 2011 to Community Action Partnership; Attn: Joi E. Boyd, 810 Barret Avenue, 3rd Floor receptionist area, Louisville, KY 40204; (502) 574-7301

2011 Poverty Guidelines (cont)

Persons in Household	<u>125% Federal Poverty Guidelines</u>	
	125% Annual Income	125% Monthly Income
1	13,612.50	1,134.38
2	18,387.50	1,532.29
3	23,162.50	1,930.21
4	27,937.50	2,328.13
5	32,712.50	2,726.04
6	37,487.50	3,123.96
7	42,262.50	3,521.88
8	47,037.50	3,919.79

For family units of more than 8 members, add \$3,820 (annual income) or \$318.33 (monthly income) for each additional member