

THE MEDALLION FUND

Sobre el Programa

El programa The Medallion Fund fue creado por empresarios locales que reconocen que un personal especializado es importante para expandir el desarrollo económico. Últimamente, Eastern Bank ha contribuido un monto significativo que permitirá que se realicen muchas más concesiones durante los próximos tres años. El objetivo del Fondo es asistir a individuos interesados en asistir a programas vocacionales o técnicos acreditados para mejorar las habilidades como personal, especialmente en ocupaciones de alta necesidad en New Hampshire.

Quién Debería Solicitar

The Medallion Fund brinda becas a individuos de cualquier edad que se matriculen en cualquier programa vocacional o técnico acreditado que los ayudará a aumentar su empleabilidad. Los estudiantes actualmente matriculados en un BA u otros programas avanzados de grado no son elegibles

Un candidato puede estar planeando asistir a un colegio comunitario, escuela vocacional, escuela de comercio, formación u otro programa de capacitación a corto plazo en campos tales como tecnología automovilística, fontanería, calefacción, construcción, fabricación avanzada, reparación de computadoras, etc.

The Medallion Fund da preferencias a solicitantes que:

- Están cursando campos de comercio de fabricación tradicional tales como fontanería, electricidad, construcción, mecanizado, u otras ocupaciones de alta necesidad;
- Tienen una visión clara de cómo su educación los ayudará a lograr sus objetivos de empleo y carrera;
- Han tenido pocas o ningunas oportunidades de educación o capacitación;
- Han realizado un compromiso financiero a su programa educativo.

Calificaciones

The Medallion Fund está interesado en ayudar a individuos que:

- Tienen la motivación de establecer y completar sus objetivos de capacitación;

- Demuestran competencia y un compromiso en su campo de estudio elegido;
- Son residentes legales de New Hampshire.

Qué Necesita para Solicitar

- Un historial de su empleo;
- Calificaciones de cualquier capacitación realizada en el pasado en los últimos 5 años.

Cuándo Solicitar

No existe una **plazo** para la solicitud del Medallion Fund. Las solicitudes se aceptan en cualquier momento del año. Las decisiones se toman cada cuatro a seis semanas. Los solicitantes son notificados de las decisiones mediante correo regular.

Dónde enviar la solicitud

The MEDALLION FUND
c/o NHCF
37 Pleasant Street
Concord, NH 03301-4005

Concesiones

Este es un programa competitivo. No existen fondos suficientes para conceder a todos los solicitantes. Típicamente hacemos concesiones al 50% de quienes solicitan.

Cómo se pagan las concesiones

Si recibe una concesión, puede esperar que se le envíe un cheque de concesión dentro de las dos semanas después de recibir su carta de concesión. Es más probable que su cheque de concesión se haga copagable a usted y al programa de capacitación que planea asistir.

Para más información

Si tiene alguna pregunta sobre esta solicitud o sobre Medallion Fund, llame a la Oficina de Ayuda para Estudiantes en la Fundación al 1-800-464-6641 o envíe un correo electrónico a studentdocs@nhcf.org

Por favor use solo inglés al completar la solicitud.

PERSONAL INFORMATION

Applicant Name: Ms. _____

Mr. First Last

Home Mailing Address: _____

_____ City Zip code

Town/ City Residency (if different from mailing address): _____

(____) _____ (____) _____ _____
Cell or Home phone Work Phone Email Address

Birth Date (mm/dd/yy): _____ Social Security Number (last 4 digits only): _____

Ethnicity (check one):

- African American
- Asian/Pacific Islander
- Hispanic/Latino
- Native American
- White (non-Hispanic)
- Other (Please Explain) _____

If you or your parents were born outside of the US – what was your country of origin? _____

If you or your parents were born outside of the US – how long have you lived in the US? _____

High School Graduation Date (mm/yy): _____ or GED/HiSET Date (mm/yy): _____

(If you completed high school or GED within the past 5 years, please send a transcript with your application)

For applicants who attend(ed) NH high schools:

What is the name of the high school from which you are graduating or have graduated? _____

Did you attend classes at the local CTE (Career & Technical Education) center while in high school? yes no

If YES, what is the name of the CTE School? _____

If YES, in what CTE program(s) were you enrolled? _____

Have you completed any training or education beyond high school? yes no

(If yes, please detail what the training was and what credential you earned (certificate, license, AA or BA degree) and the date of completion; if within 3 years, please include transcript or grades). Example: Manchester Community College; welding certificate; 02/2015

Training/School Credential Earned Date of Completion

Training/School Credential Earned Date of Completion

Training/School Credential Earned Date of Completion

PERSONAL INFORMATION - Continued

If you are a recent high school graduate, please list any community service, internships or volunteering or work-based projects in which you have participated. Please also include other school-based activities such as sports, band or clubs like HOSA. If you have been out of school for 3 years or more, please use this section to list volunteer or community activities in which you participate. It is helpful to know how long you have been involved with a particular activity. *You may submit a current resume instead of filling out this section.*

Activity	How Long? <i>(from MM/YY to MM/YY)</i>
_____	/___ to ___/___
_____	/___ to ___/___
_____	/___ to ___/___
_____	/___ to ___/___

Please list any paid work experience you have had. It is important that we know how long you stayed with a particular employer and what job you held. *You may submit a current resume instead of filling out this section.*

Employer	How Long? <i>(from MM/YY to MM/YY)</i>	Job Held
_____	/___ to ___/___	_____
_____	/___ to ___/___	_____
_____	/___ to ___/___	_____
_____	/___ to ___/___	_____
_____	/___ to ___/___	_____
_____	/___ to ___/___	_____

FUTURE PLANS

Please tell us about your plans after you finish the training/education program for which you are seeking aid. What job you hope to obtain? Do you have a career goal that you hope to pursue later on? Why did you choose this current course of study or career?

SPECIAL CIRCUMSTANCES

Please tell us about any special person, family or financial circumstances that will help us better understand your request for aid *(Examples: unemployment; homelessness, addiction, incarceration etc.)*.

CURRENT EDUCATION/TRAINING PLANS

School/Program you plan to attend: _____

Start Date (mm/yy): _____ Completion Date (mm/yy): _____

Credential You Will Receive upon Completion (check one):

- Associate's Degree
- Trade License or Certificate
- Other – please explain: _____

If you are already enrolled in a degree program, please use the "start date" to tell us when your next academic term starts. Also, please enclose a copy of your most recent transcript from prior coursework

FIELD OF STUDY

Check one that best describes what educational/training program in which you are enrolling

- Accounting/Finance
- Advanced Manufacturing Processes
- Applied Technology
- Automotive/Diesel Technology
- Computer Technology
- Cyber Security
- Dental Hygiene
- Electrical
- Engineering Technology
- Allied Health Care (LNA, LPN, CMA, Radiology, Physical Therapy, etc.)
- Human Service/Social Work
- HVAC/Pipefitting/Tube bending
- Information Technology
- Machining
- Mental Health/Counseling
- Nursing (RN only)
- Physical Sciences (Chemistry, Physics)
- Plumbing
- Welding
- Other – Please Explain: _____

COST OF EDUCATION & HOW YOU PLAN TO PAY FOR IT

Medallion awards are rarely made to cover the full cost of an education program. We expect applicants to contribute financially toward the cost of their educational program. In addition, we expect applicants to apply for Federal or State financial aid (if your education program qualifies for funding). To be eligible for Federal aid programs, you will need to complete the Free Application for Federal Student Aid at www.fafsa.ed.gov.

We need some basic information about the cost of your educational program and any aid that you may be receiving. To complete the following section you'll need to look up cost information for the school or program you plan to attend. Having a calculator will be helpful.

Note: If you need help with this section, please call the Student Aid Office at 1-800-464-6641 ext. #2 or email studentdocs@nhcf.org

PROGRAM COSTS

- | | |
|------------------------------------|----------|
| 1. Tuition (cost to enroll) | \$ _____ |
| 2. Books and/or equipment | \$ _____ |
| TOTAL PROGRAM COST (add #1 and #2) | \$ _____ |

RESOURCES

- | | |
|--------------------------------------|----------|
| 3. What you (& your family) can pay* | \$ _____ |
| 4. Pell Grant | \$ _____ |
| 5. Stafford or Perkins Loans | \$ _____ |
| 6. Employer reimbursement | \$ _____ |
| 7. Veterans Benefits | \$ _____ |
| 8. NH Voc-Rehab | \$ _____ |
| 9. Other State Funding Programs | \$ _____ |
| 10. Other private aid or loans | \$ _____ |
| TOTAL RESOURCES (add #3 thru #10) | \$ _____ |

**If you filed the FAFSA, you should use the EFC figure here*

AID GAP

(TOTAL PROGRAM COST *minus* TOTAL RESOURCES) \$ _____

AMOUNT YOU ARE REQUESTING FOR AID \$ _____

Note: Pell Grant and Stafford/Perkins Loans are Federal/State financial aid that are awarded to people based on submitting the FAFSA. If your program isn't eligible for Federal aid enter 0.

CERTIFICATION

I certify that the information on this form is true and complete to the best of my knowledge. I understand that the financial information will be considered confidential, for review by the New Hampshire Charitable Foundation and members of the Scholarship Advisory Committee. I also agree that my name can be used in announcements made by the Foundation or affiliated organizations regarding any award I may be given.

Applicant Signature & Date

FAMILY FINANCIALS

If you are an "Independent" student you won't need your parent's financial information for this section but you will need your most recent tax return. You are considered "Independent" if any of the following apply:

- you are at least 24 years old; or
- you are under 24 but you have:
 - served in the military, or
 - you are a ward of the courts, or
 - you are married and living away from your parents, or
 - you unmarried but with dependent(s) of your own, or
 - you haven't been claimed as a dependent on your parents IRS tax return for 2 consecutive years.

If none of the above apply to you, you are considered a "Dependent" student and will need information from both your IRS tax return and your parents IRS tax return.

YOUR INFORMATION

Adjusted gross income: \$ _____

Total U.S. income tax paid: \$ _____

Income earned from work \$ _____

Untaxed income and benefits
(Child Support, AFDC, ADC, SSI): \$ _____

Medical/dental expenses not covered by
Insurance: \$ _____

Cash, savings, stocks, bonds,
CD's, etc.: \$ _____

Net value of real estate not used as primary
residence (market value less balance of mortgage):
\$ _____

Parent or Spouse INFORMATION

Adjusted gross income: \$ _____

Total U.S. income tax paid: \$ _____

Income earned from work by
Father (spouse): \$ _____
Mother (spouse): \$ _____

Untaxed income and benefits
(Child Support, AFDC, ADC, SSI): \$ _____

Medical/dental expenses not covered by
Insurance: \$ _____

Cash, savings, stocks, bonds, CD's, etc.:
\$ _____

Net value of real estate not used as primary
residence (market value less balance of mortgage):
\$ _____

ADDITIONAL FAMILY INFORMATION

My current marital status (circle one): married divorced widowed single

I have dependent children (circle one): Yes No Number of dependent children: _____

Total number of family members who live in the household (include yourself): _____

Number of family members who will be attending training/college during the year (include yourself): _____

APPLICANT APPRAISAL

APPLICANT: The applicant appraisal page should be filled out by someone who is not a family member or a personal friend. It should be filled out by someone who knows you and your skills – this could be a current teacher, employer, former employer, case worker, faculty member, religious or community leader. You may substitute a letter of recommendation from any of the above for this page.

APPRAISER: Please rate the applicant's skill 1 for excellent; 2 for adequate; 3 for needs improvement. You should return this page to the applicant in a sealed envelope. Please do not send the appraisal to the Foundation directly.

The Applicant works to the best of his/her ability

The Applicant is able to set realistic and attainable goals

The Applicant follows through and completes tasks

The Applicant works well in a team

The Applicant is respectful of others

The Applicant is able to take direction well

Please tell us more about this applicant and your relationship to him/her:

Appraiser Signature Date & Phone or Email