

**LEON N. WEINER
EDUCATION FOUNDATION (LNWEF)
CERTIFICATE SCHOLARSHIP
APPLICATION FORM**

This form is interactive and designed to be submitted electronically. The application is to be completed by individuals interested in a certificate training course which would make them more marketable to enhance their career goals. Please read the CERTIFICATE SCHOLARSHIP APPLICATION INSTRUCTIONS prior to completing this form.

Date _____

Name _____

Name of the Apartment Community in Which You Live _____

I. BIOGRAPHICAL INFORMATION (Confidential):

Home Address _____
Street City State ZIP

Home Phone _____ Cell Phone _____

Email Address _____

Are you a U.S. citizen? _____ If not, are you a legal resident? _____

Birthdate _____ Age _____ Male _____ Female _____

II. FAMILY STATUS

How many people live in your home? _____

Are you the head of your household? ___ Yes ___ No

Marital Status _____

Do you have children? Yes ___ No ___

If yes, how many? _____ What are their ages? _____

III. EDUCATIONAL BACKGROUND INFORMATION

A. High School and College

High School/College	Years Attended	Major, if Applicable	Diploma/Degree Earned

B. Additional Education/Training Completed

<u>Other Education/Training</u>	<u>Year(s) Attended</u>	<u>Major if applicable</u>	<u>Diploma/Degree/Cert earned</u>

C. Are you currently enrolled in any training program? _____

If yes, name of course _____

When will you complete the program? _____

IV. EMPLOYMENT HISTORY

Complete the chart below starting with your most recent job.

Employer	Employment Dates	Position	Hours/Week

V. REQUEST

A. Training program for which you are applying : _____

B. Name of training facility: _____

C. Cost of program: _____

D. Start and Finish Dates: _____

E. What credential/certificate will you earn upon completion? _____

F. Do you plan to complete any of your coursework online? ___no ___yes

VI. PERSONAL STATEMENT

Please state in approximately 100-200 words how completing this training program will improve your employment opportunities and help you reach your career goal. Include anything else you would like us to consider when reviewing your application.

VII. APPLICANT AFFIRMATIONS

By checking this box, I affirm that the information supplied in this application and accompanying documentation is complete, accurate and supplied by me and I agree that LNWEF may rely on the truth and accuracy of all such information to determine my eligibility for a LNWEF Scholarship. In addition, I acknowledge that if the determination by LNWEF is that any of such information is false or inaccurate, this may alone be grounds for denial of my eligibility for a past, present or future LNWEF Scholarship.

By checking this box, I give permission to LNWEF representatives to contact Arbor Management, LLC to verify that I am a resident in good standing at the home address listed on this application.

By checking this box, I acknowledge and agree that LNWEF will and may use all information contained in this Application Form or otherwise disclosed to LNWEF for the purpose of determining my eligibility for a LNWEF Scholarship. In addition, I understand and agree that LNWEF will keep confidential the information labeled in the sections above as “confidential” and any other information I disclose to LNWEF and indicate in writing, is “confidential”. I acknowledge and agree that LNWEF and Leon N. Weiner & Associates, Inc., a Delaware corporation (“LNWA”) may use or publicly disclose (including publishing, broadcasting, posting, and otherwise releasing, communicating and divulging) any other information contained in this Application or otherwise disclosed to LNWEF as well as the amount(s) of the LNWEF Scholarship(s) awarded to me, the names of the institution(s) and other persons, entities or programs to whom the LNWEF Scholarship(s) awarded to me are being paid, my name, course(s) of study, degrees earned or awarded, and LNWA sponsored apartment development where I reside, on LNWEF’s and LNWA’s website and in other LNWEF prepared or authorized promotional materials, publications or releases, as well as to third parties such as governmental agencies, public officials, political figures, on public media (electronic, broadcasting, social, print, etc.) and to charitable organizations, potential and actual donors, and others.

By checking this box, I acknowledge that representatives of LNWEF may require, and I agree to disclose to such representatives, additional information they may, from time to time, request from me in order to fully consider my Application and that my failure to comply with any such requests may alone be grounds for denial of my eligibility for a LNWEF Scholarship.

By checking this box, I acknowledge that I have read and understand the Application Affirmations.

APPLICANT’S NAME

DATE

LNWEF CERTIFICATE SCHOLARSHIP APPLICATION CHECKLIST

Applications must be submitted by email. **We will not consider incomplete applications.**

Item #	Completed (check)	Item
1.		Fully Completed Application Form
2.		100-200 Word Essay