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| The Volunteers In Corrections Advisory Board will provide educational scholarship funds for qualified applicants who are current or former clients of the Ramsey County Community Corrections Department.  |
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| **Funding** | Up to $2,500.00 per quarter/semester for a maximum of three (3) quarter/semesters. |
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| **Use of Funds** | Funds will be paid directly to the school to cover the costs of:* Tuition
* Books
* Fees (e.g. technology, lab fees)
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| **First Scholarship Requirements** | *In order to receive the first of three potential scholarships, applicants must:** Be a current or former client (within the last five (5) years) of the Ramsey County Community Corrections
* Be accepted into a school prior to submitting an application
* Complete the Scholarship Application (attached)
* Provide a letter of recommendation from the primary Probation/Parole Officer or Case Worker/Manager
* Provide a letter of recommendation from a teacher, school counselor, clergy person, or person familiar with your history
* Attach to your application proof of acceptance or attendance, such as a bill/invoice, class schedule and/or transcripts
* Interview with the Scholarship Committee
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| **Second and Third Scholarship Requirements** | *Applicants may reapply for additional funds for future quarters/semesters. Scholarships will only be awarded a maximum of three (3) times. To qualify, applicants must:** Maintain a 2.0 or higher grade point average (GPA)
* Have an 80% or higher attendance rate
* Have no further difficulty with the law, including probation violations
* Complete Section 1 (Applicant Information) of the Scholarship Application (attached). If there have been changes in schools, applicants must complete Section 2 (Educational Background) as well.
* Provide previous quarter/semester grades or transcripts.
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| **Selection** | The Volunteers in Corrections Advisory Board Scholarship Committee will determine eligibility of an applicant and select scholarship recipients. As noted earlier, scholarship applicants must meet the requirements and provide the proper paperwork. Payments will be made directly to the school.Scholarship applicants will be notified via US Mail and/or via telephone within one week if they have been selected to receive a scholarship.  |
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| *By accepting a scholarship, the applicant agrees to be contacted by a representative of the Volunteers in Corrections Scholarship Committee to provide information on how the scholarship benefited him/her.* |

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| **Date**  |  |  | [ ]  Adult Services (Probation/Parole) [ ]  Correctional Facility |
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|  |
| **ApplicantInformation** |  |  |  |  |  |
| Last |  | First |  | Middle |
|  |  |  |  |  |  |
|  |  |  |  |  |
| Street |  |  | Apartment |
|  |
|  |  |  |  |  |
| City |  | State | Zip Code |
|  |  |  |  |  |
|  |  |  |  |  |
| Email address |  | Phone Number |  | Other Number |
|  |
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|  | *Please list schools attended, including high school, trade/business school, and college.* |
| **Educational****Background** | ***Name and Addresses of School*** | ***Dates Attended*** | ***Received Diploma*** |
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|  | *Please list your employers starting with the most recent.*  |
| **Employment Information** | ***Name and Addresses of Employer*** | ***Job Title*** | ***Dates Employed*** |
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| **Future or Current School or Education Program** |  |  | *Have you been accepted into this school or program? Please check:* [ ]  Yes [ ]  No |
| Name of School |  |
|  |  |
|  |  |
| Street Address |  |
|  |  |
|  |  |  |  |  |
| City | State |  | Zip Code |
|  |
|  |  | $  |  | $  |  | $ |
| Program/Course of Study | Tuition  | Books | Fees/Other |
|  |  |  |  |  |  |  |
| *Are you receiving or have you applied for any other financial assistance for your education? Please check:* [ ]  Yes [ ]  No *(if yes, please indicate amount)* |  | $ |
|  | Aid Amount |
|  |  |  |  |  |  |  |
|  | *Please tell the Scholarship Committee a little about yourself, such as why you chose this school or program and what you plan to do after graduation.*  |
| **Personal Statement** |  |
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| **Signature** | ***I declare the information on this application is, to the best of my knowledge, true, correct, and complete. By signing this application, I authorize Ramsey County Volunteers in Corrections to obtain information as needed to verify the data provided.***  |
|  |  |  |  |  |
| **Applicant’s Printed Name** |  | **Applicant’s Signature** |  | **Date** |
|  |  |  |  |  |  |
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|  |
| Please return completed application to: | **VinC USE ONLY** |
| Received:\_\_\_/\_\_\_/\_\_\_\_Refereed to:\_\_\_\_\_\_\_\_\_\_Disposition:\_\_\_\_\_\_\_\_\_\_ |
| ***If you have any questions, please ask your Probation Officer, Case Worker, or contact******Volunteers in Corrections at 651-266-2694***  |