

Valley Educational Associates' Scholarship Application



Valley Educational Associates is committed to helping our employees in achieving their academic goals while providing outstanding care to adults with developmental disabilities in Western Massachusetts. As part of this commitment, the VEA Board of Directors has developed this scholarship to recognize and reward the academic goals and community involvement of Valley Educational Associates' direct care staff.

Scholarship Terms: Valley Educational Associates will accept and review applications on a rolling basis. Two scholarships will be awarded each academic year for staff applying to the Holyoke Community College Direct Support Certificate Program. The scholarship is designed to cover the full cost of the program courses and not to exceed \$450 nor will it retroactively apply to completed courses.

You must submit your application, resume, and copy of acceptance letter to the Holyoke Community College Direct Support Certificate Program through email to Maggie Ducheney, Chief Programs Officer at ducheneyVEA@yahoo.com

Filling out and sending this form does not guarantee automatic winning or compensation.

I, _____ have read, understand and agree to following terms and conditions of the Valley Educational Associates' scholarship.

- ☐ Should I receive the scholarship, I affirm that I will maintain a 3.0 (B average) grade point average and will continue the program to its completion.
- ☐ I understand I am responsible for purchasing any books, equipment, or additional incurred costs/fees for the courses.
- ☐ I give permission to the board of directors to request and review my employment record with Human Resources.
- ☐ I have included my academic transcript and application for consideration in the Valley Educational Associates' Scholarship program.
- ☐ I understand that this scholarship will be available only to direct care and non-management staff.
- ☐ I agree to submit my transcript each semester to Valley Educational Associates' Human Resources. If my GPA falls below a 3.0, I will be responsible for paying for my next semester's courses. When my GPA is shown to be back to a 3.0, I will be reimbursed for my courses.
- ☐ I have worked a minimum of one year at Valley Educational Associates
- ☐ I plan to continue my employment at VEA for at least one year after completing this program.

I affirm that all of this application is my own work or formally cited from other sources. I testify the information contained herein is true and accurate to the best of my knowledge and belief.

Date _____ Signature _____

Legal name in full
(Print/Type) _____
Last Name First Name M.I.

Permanent residence _____
Number, Street, and Apartment Number

City St ZIP

E-mail address _____

Do you have your GED or high school diploma ☐ Yes ☐ No _____

List college and high school activities (student government, sports, publications, school-sponsored community service programs, student-faculty committees, arts, music, etc.). Additionally, include public service and community activities (homeless services, environmental protection/conservation, advocacy activities, work with religious organizations, etc.). List in descending order of significance.

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Name _____

Describe a time when you assumed a leadership position and how that positively affected you and your community.

What would your supervisor say is your biggest contribution to your VEA program site?

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Name _____

What are your long-term goals as they relate to the field of Human Services, and how will this scholarship help you achieve them? (Please address academic, personal and professional goals).

Need additional financial support?

Go online to fill out a Free Application for Federal Student Aid (FAFSA) electronically

<https://fafsa.ed.gov/> or visit this link <https://fafsa.ed.gov/options.htm> to print a paper application to submit via mail.

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