



CAPFAA Scholarship Application For Students Enrolled in a Graduate/Professional Program In the 2010-2011 Academic Year

The Connecticut Association of Professional Financial Aid Administrators (CAPFAA) is pleased to announce the CAPFAA Scholarship for the 2010-2011 academic year. This scholarship will be awarded to a total of 5 students for \$1,000 each and is NOT renewable.

CAPFAA was founded in 1969 with the purpose of promoting professional preparation and cooperation between Connecticut college and university student financial aid administrators as well as others in educational institutions, government agencies, foundations, and private community organizations concerned with the support and administration of student financial aid. We feel this scholarship is an excellent way to promote our mission of effectively serving the interest and needs of students in their pursuit of a higher education.

ELIGIBILITY CRITERIA:

All candidates:

- Must be enrolled in a Connecticut post-secondary institution as a full-time graduate student in a degree program. The institution the student attends **MUST BE** a current institutional CAPFAA member.
- Must have completed a minimum of 1 term or semester of full-time study.
- Must have a federal expected family contribution (EFC) of 5000 or less.
- Must have a minimum cumulative G.P.A. of 3.0 as an undergraduate in their final semester **or** a minimum cumulative G.P.A. of 3.5 as a graduate student **or** its equivalent (class rank, percentile, honors) as verified by the Financial Aid office.
- Must have performed unpaid community service or volunteer activities in the past 12 months not related to educational credit.
- Must not be a prior CAPFAA Scholarship winner.
- Must be eligible for federal financial aid.

OTHER INFORMATION:

- Recipient and guest will be invited to attend the CAPFAA Annual Business Meeting in the late spring for the scholarship presentation.
- Scholarship checks will be made payable and sent directly to the school in two disbursements. Half will arrive for Fall 2010 and the other half for Spring 2011.

In order to be considered, you must complete the 2010-2011 CAPFAA Scholarship Application, signed by your school's financial aid officer; enclose all required attachments, including a copy of your official academic transcript; and mail your application packet so that it is postmarked by April 1, 2010. Incomplete or late applications will not be reviewed. Mail to:

Bryan Lewis
Associate Director of Financial Aid Services
Capital Community College
950 Main Street, Hartford, CT 06103



CAPFAA Scholarship Application
For Students Enrolled in a Graduate/Professional Program
In the 2010-2011 Academic Year

Name _____

Home Address _____

City _____ State _____ Zip _____

Home Phone # _____ Email Address _____

Local Address _____

City _____ State _____ Zip _____

Local Phone # _____

Name of school you are attending for 2009-2010 _____

Name of school you will attend for 2010-2011 _____

Major _____ Cumulative G.P.A. _____

Anticipated Date of Graduation _____

ATTACHMENT 1: In one page or less, explain why you think you would be a good candidate for the CAPFAA scholarship.

ATTACHMENT 2: COMMUNITY SERVICE ACTIVITIES: In one page or less, please give a detailed description of your unpaid community/volunteer activities in the past twelve months not related to educational credit. Be sure to include dates, approximate hours, and descriptions of activities.

ATTACHMENT 3: Please attach a copy of your academic transcript.

Student's Signature _____ Date _____

OVER

TO BE COMPLETED BY YOUR SCHOOL'S FINANCIAL AID OFFICE

Is this student considered full-time? Yes No

If **NO**, but there are extenuating circumstances, please explain:

The data provided below is for the award year 2009-2010 2010-2011

Student's cost of attendance \$ _____

Student's Federal EFC. \$ _____

Student's total need-based financial aid \$ _____

Student's total non-need based financial aid \$ _____

Will this scholarship replace an institutional grant award? Yes No

If **YES**, the student is not eligible

Additional Comments: _____

What type of grading scale does your institution use? G.P.A. Other

If other, please provide equivalent (Class Rank, Percentile, Quintile, Honors) _____

Is this student meeting the minimum grading requirements for the scholarship program?
(Minimum G.P.A. of 3.5 or equivalent for graduate students) Yes No

Name of Institution: _____

Name of Financial Aid Officer: _____

Title: _____

Signature: _____ Date: _____