

WISCONSIN COUNCIL FOR AFFORDABLE AND RURAL HOUSING



Grants

WI-CARH ACADEMIC ENRICHMENT APPLICATION

The Wisconsin Council for Affordable & Rural Housing (WI-CARH) would like to encourage students in grades 3-12 to participate in academic enrichment programs and encourage academic excellence among all applicants. The WI-CARH Scholarship Committee will offer annual grants in the amount not to exceed **\$500** per student, per year, until all funds are used, to enable students to participate in an academic enrichment activity.

General Application Requirements and Eligibility Criteria of Applicants:

■ **Status**

The Applicant must reside in a USDA Rural Development program property that is a participating member of WI-CARH at the time of the application. **WI-CARH is expanding the opportunity to not only current residents, but now to property employees, or a direct family member of a property employee of a WI-CARH member affordable housing community.** Preference will be given to applicants residing in apartment complexes which are members of WI-CARH. Resident applicants must submit verification from the WI-CARH member that the applicant is a resident in good standing.

■ **Eligible Activities**

Little League, Soccer Leagues, Basketball or Volleyball Leagues, 4H Camp; Music or Band Camp; Sports Camp; Cheerleading Camp; Girl Scout or Boy Scout Camp; International Youth Exchange Program, or to allow a student to accompany their class to a foreign country or other school sponsored trips. **These activities can be conducted during the school year and not limited to summer activities.** **Please note this list is not all inclusive, additional academic building opportunities will be considered.*

■ ***Minimum Grade Point Recommendation (*applies to high school applicants only)**

Recommended accumulative 2.5 grade point average (GPA) for high school applicants. Must provide evidence of grades and high school affiliation.

■ **Application Form**

The application form must be completed in its entirety. Incomplete applications will not be considered.

■ **Activity Brochure/Informational Pamphlet**

The applicant must submit a brochure or pamphlet describing information regarding the activity.

■ **Application Process**

WI-CARH will accept, review, and award applications as received throughout the year based on when the activity will take place. Applications should be signed by the Site Manager or Member Representative. Applications can be submitted to the Site Manager, Member Representative or to the WI-CARH office by e-mail at info@wicarh.org or by mailing application to:

**WI-CARH
PO Box 258098
Madison, WI 53725**

TO BE COMPLETED BY SITE MANAGER OR MEMBER REPRESENTATIVE

Name of Site Manager/Representative: _____ Title: _____

Site Manager's/Representative's Signature: _____

Site Address: _____ City, State, Zip: _____

Phone #: _____ FAX#: _____ E-mail: _____

WI-CARH ACADEMIC ENRICHMENT APPLICATION

***Please complete for Grades 9-12**

Applicant Name: _____ Phone Number: _____

Address: _____

City, State, Zip: _____

Date of Birth: _____ Age: _____

Parent/Guardian's Name (if applicable): _____

Address: _____

City, State, Zip Code: _____

Name & Address of High School: _____

Date of expected HS Graduation: _____ GPA Score: _____ Activity Enrollment Deadline: _____

Please answer ALL of the following questions:

*Use a separate sheet if necessary

1. Have you received any other financial assistance for this activity? (If yes, list type of assistance and dollar amount received),

2. Please explain why this activity would be a great experience:

3. Summarize your academic achievements. (i.e., scholarships, honors, awards, etc.):

4. List any extracurricular school and/or community activities in which you are/were participating. (i.e., clubs, teams, church, community service etc.)

5. Indicate any jobs, which you are holding or have held in the past.

6. What are your future academic plans?

Signature of Applicant

Date

Signature of Parent/Guardian

Date

WI-CARH ACADEMIC ENRICHMENT APPLICATION

***Please complete for Grades 3-8**

Applicant Name: _____ Phone Number: _____

Address: _____

City, State, Zip: _____

Date of Birth: _____ Age: _____

Parent/Guardian's Name (if applicable): _____

Address: _____

City, State, Zip Code: _____

Name & Address of School: _____

Activity Enrollment Deadline: _____

Please answer ALL of the following questions:

*Use a separate sheet if necessary

1. Have you received any other financial assistance for this activity? (If yes, list type of assistance and dollar amount received)

2. List any extracurricular school and/or community activities in which you are/were participating. (i.e., clubs, teams, church, community service, etc.)

3. Please explain why this activity would be a great experience:

Signature of Applicant

Date

Signature of Parent/Guardian

Date