



SCHOLARSHIP REQUEST APPLICATION 2012

The policy of Leadership Tomorrow is to provide a limited number of scholarships to those candidates who are accepted into the program and demonstrate financial need that will prevent participation. Assistance will not be granted for the entire tuition amount under any circumstances. If granted, assistance can range from approximately \$300 to a maximum of \$2,500, but is typically around \$1,000. Award amounts are based on the number of requests received and the amount of funds available each year.

Priority for scholarships is given to those candidates who are either employed in the non-profit sector, public sector, self-employed, or not employed. Candidates employed by large, private-sector companies are not eligible for assistance. To be considered for financial assistance you and your employer must complete the form below and submit it with your Leadership Tomorrow application.

Applicant _____

Phone _____

Employer _____

Mailing Address _____

City _____ State _____ Zip Code _____

1. Amount you are contributing toward tuition: \$ _____ (minimum \$350)

2. Amount your employer is contributing toward tuition: \$ _____

3. Amount of scholarship assistance requested: \$ _____

Total Tuition: (total lines 1-3) \$ 3,500

4. Describe your need for financial assistance briefly, including a description of your specific PERSONAL financial situation (using the reverse side of this application or a separate piece of paper).

Leadership Tomorrow will consider accepting payments over a ten-month period. If you would like to be considered for a payment plan, please indicate the monthly payment amount requested below:

I request being considered for a monthly payment plan. I can afford a maximum of \$ _____/month.

I confirm that the above information is a true account of my situation.

Signature _____ Print Name _____ Date _____

To be completed by employer:

I confirm that our company/organization will contribute \$ _____ toward the above applicant's tuition.

Signature _____ Date _____

Print Name _____ Title _____ Phone Number _____